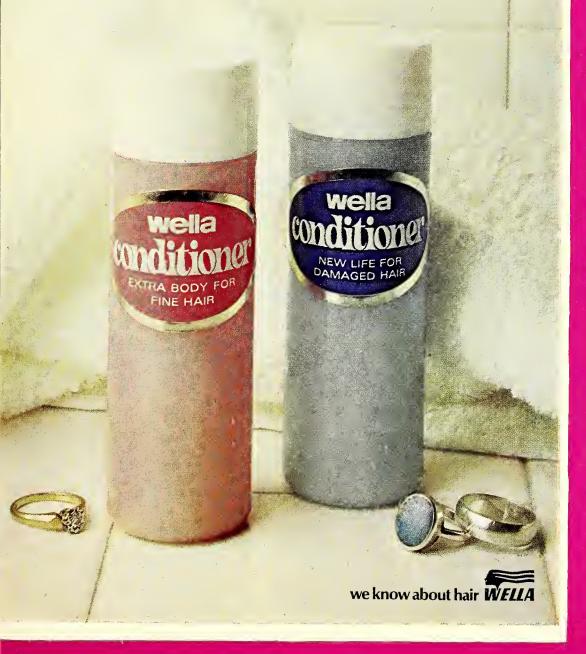
Chemist & Druggist

NOVEMBER 20 1976 THE NEWSWEEKLY FOR PHARMACY

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Tetbury doctors are offered compensation

Parliamentary tug-of-war on analgesics

Hosiery problems and policy

PART 2

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The newsweekly for pharmacy

20 November 1976 Vol. 206 No. 5042

118th year of publication

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comment

Tetbury

The past week has seen the pharmaceutical publicity machine operating in Tetbury—and all credit to it for getting into top gear under the leadership of the Society's new Press secretary, Maureen Tomison.

As usual, the response of the media is mixed, ranging from sympathetic interviews, through total indifference, to the doctors' case being preferred to the pharmacists' ("Chemists answered" was the Birmingham Post headline).

CONGRATULATIONS to all concerned in the Tetbury protest. We learn as we go to press that the effort has paid off and the doctors are to withdraw (see p696)

Perhaps the most effective media were radio and television. Mr Norman Bell, one of the Tetbury pharmacists involved, told C&D that a customer telephoned him immediately after his television interview on ITN at lunchtime, expressing anger at what the doctors intended to do. And by the middle of the afternoon following a ten-minute interview with Mr J. P. Kerr, members of the Society's Council, on the "Jimmy Young Show", the BBC were accepting no more "phone-backs" from people sympathetic to the pharmacists' side because they had already had such a good response. Mr Bell added that other local people wanted to hold public meetings and organise petitions on his behalf and by Wednesday he knew of at least four Tetbury people who intended to complain to the Family Practitioner Committee about the doctors' plans.

However, the new element in the saga, the offer by pharmacists to compensate the Tetbury doctors for any loss they may have incurred in organising their premises for dispensing, has not received the attention it might. In any case, reimbursement derived from the pockets of generous pharmacists is hardly a credible solution to the doctor dispensing problem nationally.

Last week we gave an example of local authority activities upsetting local pharmaceutical services; this week we have an alleged threat to another pharmacy arising from a local contractors committee failing to support a health centre project (p697). Inevitably there will be another side to these problems—the Newcastle committee must have the interests of other contractors in mind, for example—but the over-riding interest must be that of the public. Recent events suggest that the public interest in ready access to a pharmaceutical service is failing to receive prime consideration. It is unlikely to do so until there is a planned control on the service.

Contractors' representatives will have a motion on that subject before them when they meet to discuss the new contract proposals on Sunday; due note should be taken of recent events when the motion is considered.

Compensation offer to Tetbury doctors

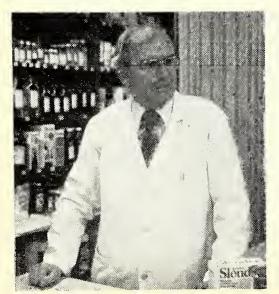
The Tetbury doctors who plan to start dispensing from December 1 have been offered reimbursement of their capital costs to date if they decide not to go ahead. The doctors claim they made a "considerable financial commitment" before the rural dispensing standstill was introduced.

The Pharmaceutical Society and the Pharmaceutical Services Negotiating Committee made the offer last week but have so far had no reply. Both organisations have also asked the Gloucestershire Family Practitioner Committee to postpone the date the doctors would start dispensing so that the validity of the form submitted by patients, asking for this service, could be taken up with the Department of Health.

Mr J. P. Kerr, a member of the Society's Council, explained to a Press conference in Tetbury on Tuesday that the local doctors had delivered what amounted to an ultimatum to their rural area patients, demanding that they got their medicines from the surgery. "If patients are to be frightened into agreement at least one and probably both of the local pharmacists will be thrown out of business", he said, adding that the initiative for doctor dispensing should come from patients not doctors. Mr Kerr felt sure this "abuse of the Regulations" would have been reported to the General Medical Council as a breach of the doctor's ethical code.

The letter to rural area patients from Doctors P. J. Hardie, D. M. Lewsey and A. Walsh explained that legally patients had to request doctor dispensing from the FPC and included a form to fill in. "If you are to avail yourself of this facility when we dispense, we cannot give you medicines at home or in the surgery unless you have signed these forms. If you do not sign the forms, you will have to take the prescriptions to the nearest chemist."

Mr Norman Bell



Dr Hardie had since been convinced that his partners' proposals would cause serious inconvenience to the community and had opted out of the plan.

STOP PRESS

"The two Tetbury doctors have graciously decided to withdraw and are to visit the Pharmaceutical Society for talks on Thursday." That statement was issued on Wednesday evening after C&D had closed for press. A further statement is to be issued after the meeting.

Mr David Ennals, Secretary for Social Services, has already been informed but further letters would be sent "in the strongest possible terms", Mr Kerr said. "What is so monstrous about this situation is that there is positively no justification for it", he continued. One of the pharmacists, Mr. Norman Bell, lived above his shop so was on 24-hour call for emergencies and there was an adequate rota service. There had been no complaints from patients about difficulties in obtaining medicines and when the doctors suggested taking over dispensing the pharmacists offered a collection and delivery service. The doctors did not bother to reply, which implied that there were no problems or the doctors were determined to take over dispensing come what may.

A further irony was that Gloucestershire and Cheltenham Community Health Councils had expressed concern about the lack of pharmacists in the county and the Gloucestershire FPC had proposed a motion at the FPC conference to help support community pharmacies.

Largest campaign

Mr Kerr said this campaign was probably the largest mounted by the pharmaceutical profession to support such a case. Usually the rural pharmacists involved were reluctant to face the consequences of possible divisions caused in the community and he paid tribute to Mr Bell and Mr Michael Bran, owner of the town's other pharmacy—Dolphin Pharmacy—for their courage. 'Mr Kerr mentioned two other doctors' practices in the area which had applied to start dispensing—in Chepstow and in Sedbury—and which were awaiting the outcome in Tetbury. "We hope the activities here will discourage them", he said.

Mr Bell explained that his business would cease to be viable if he lost 25 per cent of his dispensing and he estimated

that over 90 per cent of his prescriptions came from the Tetbury surgery. There were some 7,500 patients in the rural area practice with about 4,000 in Tetbury itself. When asked whether they intended to hold public meetings Mr Bell and Mr Bran said they hoped the publicity generated locally this week would make it unnecessary. Mr Kerr added it was hoped that those patients who had filled in forms saying they wanted doctor dispensing would write to the FPC withdrawing their applications.

The Tetbury Chamber of Trade has issued a statement congratulating the local chemists and doctors for providing a satisfactory service over the years, a service "based on doctors prescribing and chemists dispensing". They urged Drs Lewsey and Walsh to think again about their

proposals.

A local district Councillor, Mr Andrew Brown, said it would be disastrous if Tetbury lost its pharmacies and he would bring the matter to the attention of the December council meeting.

A letter signed by Mr Alan J. Smith, chief executive, PSNC, was sent on Monday to Mr Sparrow, Gloucestershire FPC administrator, asking him to bring the following points to the attention of the dispensing subcommittee which was to meet on Thursday after C&D went to

☐ That applications for a doctor to start dispensing should be voluntary and "not induced by means of canvassing or by means of a circular letter which contains a threat not to supply drugs to a patient in emergencies (contrary to the terms of service for doctors, paragraph 35, Statutory Instrument 1974 No 160)"

☐ That if the doctor were to be allowed to start dispensing the date should be delayed to allow the Department of Health to rule on the matter—"were the situation reversed and a pharmacy opened in a rural area the doctors involved are given between six and nine months' notice and a similar courtesy should be extended to the pharmacists in Tetbury".

☐ That attention should be paid to the reasoning behind Regulation 30(b) that it is for patients in rural areas where access to a pharmacy could be difficult, a case not proven in Tetbury; and that an offer had been made to reimburse doctors' capital costs.

When asked who would reimburse these costs Mr Kerr told C&D there were several possibilities but he knew of many public-spirited pharmacists who were sufficiently disturbed about their colleagues' plight to support them. One anonymous donor had already offered one-tenth of the cost.

Dr Elston Grey-Turner, secretary, British Medical Association, has denied that the doctors' letter to their patients was improper or unethical. "In this instance it was done to make them aware of an improved service being offered", he said, adding that doctors would take great exception to Mr Kerr's remarks in Tetbury.

Trade mark assignment—correction

In the October 16 issue of C&D the name of the subsequent proprietor of four "Little Miss Muffet" trade marks should have read "MAWS LIMITED". We very much regret the printer's error.

20 November 1976

Chemist & Druggist 697

An LPC's view threatens a pharmacy's future

An urban community could lose its only pharmacy—not this time through the actions of dispensing doctors or a local authority, but indirectly, as a result of a decision by the area contractors committee.

That allegation is made by Mr Brian Atkins, whose pharmacy at Byker, in east Newcastle upon Tyne, is part of a redevelopment scheme involving 10,000 inhabitants. An early plan for a large health centre was abandoned because the space was required for an underground railway and bus station and a more modest scheme—involving a five-doctor health centre, old people's home and a dozen shops (including Mr Atkin's replacement pharmacy)—was substituted with the approval of the former Executive Council.

That situation obtained until three months ago when the LPC told the AHA there was no need for the health centre and that the money could be better spent.

Rent would be prohibitive

But without the centre, Mr Atkin's pharmacy may be unable to transfer to the redevelopment. He explains that the business was started by his grandfather in 1891 and the freehold premises are in effect "rent free". To afford the overheads of the council property he needs to double his present turnover, but doubts whether that is possible without the health centre prescriptions (he currently dispenses only half the national average, nearly all domicillary, and two-thirds of his turnover is from the counter).

The five doctors expected to transfer would come from half-a-mile away—where there are at present some two dozen gps and four pharmacies in close proximity.

If no pharmacy goes into the shop development—and Mr Atkins also has the sub-Post Office concession—it seems unlikely that the other units will all be taken up. "I am the king-pin in the development", he says, adding that the local people's loyalty over the issue has been "unbelievable".

Mr Atkins is particularly annoyed over the current publicity for Tetbury (which he receives as Society branch Press officer) and says of his local committee: "Not once have they written to me or telephoned, nor has anyone been to see me about what they propose to do with my future. I have told the committee I feel aggrieved, but they are not prepared to reconsider their decision."

It is understood that the total redevelopment could take up to a decade to complete, with the Byker population reducing to 5,000 then gradually moving back to 10,000. The doctors are still believed to be willing to move into a centre—though this would be the first time for years that

doctors have practised within the famous "Byker Wall", which was a slum area before the redevelopment began.

Mr W. T. Wing, area pharmaceutical officer, told C&D that the former local authority had proposed health centres in a number of places in the city but that when responsibility was transferred to the AHA it was necessary to seek opinion from a variety of sources. The AHA has still not made its decision,

PSNC action on 'incomplete' scripts

The Pharmaceutical Services Negotiating Committee is to send a letter to Local Pharmaceutical Committee secretaries in England and Wales suggesting that they ask their family practitioner committees to write to the Local Medical Committees on the question of incomplete prescriptions.

This was the result of a discussion at last month's meeting on the problems encountered by general practice pharmacists connected with "incomplete" prescriptions and FPN 114. It was also reported that representatives of the PSNC, with representatives of the Society's Council, were to meet senior officials of the Department of Health to discuss the difficulties experienced by pharmacists over the new regulations (see last week, p669).

Additional remuneration and out-ofpocket expenses incurred in contacting the prescriber were also considered and it was decided that these matters should be

referred to the Contract Subcommittee for more detailed consideration.

A long discussion took place on the efficiency of amber glass in protecting medicaments from light, and the consequent practical problems for the pharmacist. It was agreed that the Council of the Pharmaceutical Society be invited to join the PSNC in an approach to glass bottle manufacturers about the desirability of continuing to produce white glass medical bottles after the end of the year.

The wording of the evidence to be submitted to the Royal Commission on the National Health Service was approved and the office and its legal advisers are to examine further amendments to the model draft licence between AHAs and pharmacist consortia by the Department.

'Negotiators must become more militant'

The Pharmaceutical Services Negotiating Committee must adopt similar militant attitudes and tactics to those of the junior hospital doctors, says South Glamorgan LPC. A motion to be proposed to the LPC representatives' conference on Sunday calls on the PSNC to begin negotiation to implement the terms of the new contract—but without remuneration aspects being based on global sum redistribution.

South Glamorgan LPC has produced tables for sample areas which, it says, "indicate that over a period of 25 years, the increase in the NHS fee turnover per pharmacy, in real terms, has been of the order of 20 per cent or less, for the same number of prescriptions dispensed."

The PSNC is attacked for not seeking new monies to alleviate the pharmacy-closure problem. "The provision of a pharmaceutical service is a community problem which should not be a burden assumed solely by the pharmaceutical profession." It is pointed out that Government money is found for many community needs compared with which the subsidy required by pharmacy "is a mere pittance".

JBPA outlines priorities for coming year

The Joint Boots Pharmacists Association hopes to appoint a general secretary in the near future to improve communications with Boots pharmacists.

That was stated by Mr Shaun Boney at the association's third annual meeting last month, when he was elected chairman for the coming year. Mr Boney continued that the JBPA administration would develop on a large scale and the secretariat had to change and develop accordingly.

Another priority for the coming year would be a more positive contribution to pharmaceutical affairs by increased involvement by Boots pharmacists; JBPA provided a route by which they could express their opinions on professional matters; and it had a responsibility "as the only cohesive group representing employee pharmacists", to indicate when and where necessary the views of its members. However the association would still support a membership group for employee pharmacists and would seek to make employee representation more effective.

Over 50 pharmacists attended the meeting, representing the total of 29 member associations. During a review of the previous year, it was stated that the increase in such member associations had given a national coverage to JBPA and a delegate representative system for Boots pharmacists. Adoption of a new constitution had enabled Boots pharmacists to join JBPA as individual members, joining also the member association of their choice. The joint consultative process established with Boots Co had opened a new channel of communication for Boots pharmacists, and direct contact with directors of Boots The Chemists, to supplement the existing line management structure, was a major step forward and reflected the current attitude of Boots in moving towards more obvious democracy in industrial relations.

Officers elected for the coming year included P. Joyce, vice-chairman; J. Carr, secretary; M. Horsfall, assistant secretary; J. Kenney, treasurer, and K. Mortimer publicity officer.

'Tug-of-war' on analgesics motion

A Parliamentary "tug-of-war" seems to be developing over the recent Medicines Commission rethink on its proposals concerning sales of analgesics.

As reported last week (p687), over 30 Labour MPs have signed a motion urging the Government to introduce legislation restricting OTC sale of aspirin, aloxiprin and paracetamol "as recommended by the Medicines Commission". The motion suggests that that should be done "mindful of the personal disasters caused by poisoning due to the adverse effects of analgesics and the burden the treatment of these cases places on the already hardpressed NHS resources. (See also p715.)

Mr Laurie Pavitt and Mr Arnold Shaw -both Labour MPs—have now tabled an amendment to the motion to the effect that the legislation should be on the lines originally recommended by the Medicines Commission. However, four Conservative MPs (Sir Nigel Fisher, Mr Dudley Smith, Mr Kenneth Lewis and Mr Michael Grylls) have also proposed an amendment—but their's argues against measures which would affect analgesics availability.

The latter's amendment is: "That this House, realising the burden that the treatment of minor ailments requiring analgesics would place on the NHS, were access to such medicines to be unduly restricted, and the problem facing members of the public in areas without ready access to a pharmacy, urges the Government, in the light of the reconsidered views of the Medicines Commission on this matter, to ensure the continuing availability of simple home remedies, such as analgesics, for self-treatment in all convenient retail outlets.'

Two dental health campaigns launched

Two campaigns designed to educate the public in dental health were launched during the past week.

The British Dental Health Foundation and Beecham Proprietaries have jointly produced the Macleans Home Mouth Care Manual, which is intended to give guidance on home mouth care for those who are in a position to offer such advice. Primarily it is to be mailed to dentists, schools and health visitors but it is available to the public at £0.50 including packing and postage from BDHF, 3 Harcourt House, 19a Cavendish Square, London W1M 9AD. The manual is split into two parts—the cause and prevention of gum disease together with general guidance and advice on the use of toothbrushes, dental floss etc, in the first part and dental problems of the handicapped in the second part. The use of fluoride tablets and toothpaste is advocated and the chemist mentioned as a source of supply.

The General Dental Council are campaigning to prevent tooth decay in children and have produced several aids designed for different areas of influence. A kit, provided in conjunction with Johnson and Johnson, containing a handbook, slides, leaflets, disclosing tablets, a mouth mirror and dental floss is designed for health visitors and a painting book and jigsaw puzzle is available to the public at 4p and 2½p respectively. Playgroups and nursery schools can obtain another kit from GDC 37 Wimpole Street, London.

Labour group calls for **Eraldin inquiry**

The Parliamentary Labour Health Group has asked the Commons Select Committee on Expenditure to consider an inquiry into Eraldin.

This was decided at a meeting of the group last week at which Dr Inman, from the Committee on Safety of Medicines, adverse reactions division, addressed the group on the general problems of side effects and their monitoring. Mr Laurie Pavitt, chairman of the group, told C&D on Tuesday that they hoped the Select Committee would ask its social services subcommittee to look into the matter from

two aspects: the drug's safety and sideeffects, and compensation for patients suffering from those side-effects. He added that many cases had come to light recently of people suffering side-effects; 28 had been in Birmingham and about 200 were from Lancashire. A rcply was being awaited from the Select Committee.

Weights and Measures fees up

New testing and adjustment fees for weighing and measuring equipment come into operation on December 13. The fees will be payable whether or not the equipment is passed as fit for use for trade and fees for adjustment of weights or measures by local authorities are also included. The fees are set out in the Weights and Measures (Testing and Adjustment Fees) Regulations 1976 (HM Stationery Office, SI No 1807, £0·12).

Baby tonic prohibited

The sale, supply and importation, including retailing, of Bal Jivan Chamco baby tonic (C&D, November 6, p613) has been prohibited by an Order under section 62 of the Medicines Act. Penalties for contravention of the Order are, on summary conviction, a fine not exceeding £400, or on indictment, to a fine or imprisonment for up to two years, or both.

TPF complaint against BBC upheld

The BBC Programmes Complaints Commission has substantially upheld the complaints made by the Toilet Preparations Federation about the treatment of a consumer unit investigation into make-up on the March 10 "Nationwide" programme.

Their complaint that the cosmetics industry was unfairly treated can be broken down into four parts. First, it was said that offensive and inaccurate descriptions of cosmetics were given; that mascara was described as being made up of "soot and bones"; eye shadow of "rust and jelly"; foundation of "whale's innards" and lipstick of "civet's naughty bits". It was further stated that a section which referred to a fictional cosmetics firm called "Hardley" was derogatory to the Federation member firm of Yardley to which it was claimed that it obviously referred, and that an account of EEC discussions about a draft Directive on the labelling of cosmetics contained untrue allegations about improper lobbying from a hotel in Brussels. Finally the Federation asked for some system of advance notice to ensure fairness in such broadcasts.

The adjudication committee have decided that while it is a proper function of consumer programmes to counteract the advertising put out by an industry, to make people stop and think and ask themselves if they should be spending their money on these products, the general rule is that the BBC should present information to listeners and viewers and let them make up their minds what action to take. The first part of the complaint was therefore upheld because in the opinion of the two male members of the committee the line between telling information and per-

suasion was overstepped in this broadcast in a way that caused unfairness to the Toilet Preparations Federation; "for the language used . . . was . . . calculated to discourage purchases of the products, not by furnishing information but by arousing feelings of disgust." The third member of the committee, Baroness Serota, found it necessary to dissociate herself from this judgment however, since she felt that most viewers would have been sensible enough to discount the "element of picturesque exaggeration". She went on to say that in her opinion the ridicule was directed as much against women for their uncritical use of cosmetics as against the industry.

The complaint pertaining to the use of the name "Hardley" was also upheld by two members of the committee as "illjudged", but once again Baroness Serota disagreed and accepted the BBC's argument that this was a light-hearted way of indicating to viewers a typical cosmetic company, appropriate to a programme known to have an entertainment content.

The entire committee, however, upheld the complaint that allegations concerning the EEC consultations were untrue, and all agreed that there were insufficient reasons for the BBC to deny the TPF the opportunity to contribute to such a programme by way of information, comment or participation.

The Federation have said that their action in going to the Committee was taken only after all other attempts to obtain satisfaction over previous attacks on the industry by the BBC had failed and point out that the spoken word, through intonation and emphasis, can be more damaging than the written word.

"It's a Gift!

A short story for chemists



"NO. I'D BETTER NOT RISK IT-SHE NEVER SEEMS TO LIKE WHAT I CHOOSE FOR HER. I THINK A GIFT





THAT EVENING, IN THE LOCAL ON THE WAY HOME DUR CHEMIST RAISES THE SUBJECT WITH A FRIEND IN THE SAME BUSINESS

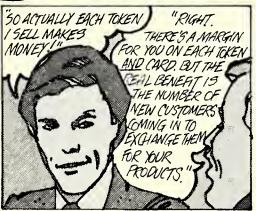


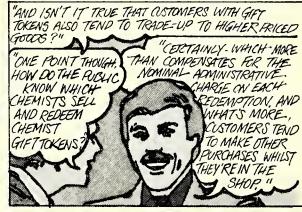
HAVEN'T BEEN READING THE TRADE PRESS.

"SANGERS HAVE JUST LAUNCHED A A GIFT TOKEN SCHEME. WHICH IS SPECIFICALLY OR CHEMISTS LIKE U.S-AND OUR CUSTOMERS OF COURGE. IUNDER-STAND I AM ONE OF OVER 1500 WHO HAVEJOINED THE SCHEME ALREADY

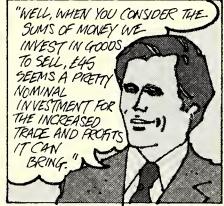


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PAGB analgesic lobbying in Scotland

The Proprietary Association of Great Britain has commissioned an agent to write to all health councils in Scotland asking them to make representation to Members of Parliament against the Medicines Commission's proposals for control of future sales of aspirin and paracetamol.

That was revealed at last month's meeting of the Pharmaceutical Society's Scottish Executive, where it was stated that, as a result, the councils had been circulated with the Society's document "Self service or safe service?". Many of the Councils had written in support of the Society's case and the Scottish Department were not aware of any which supported the PAGB. Divisional secretaries in most branch areas had also made direct representation to MPs on the matter.

Baby foods from pharmacies with tokens

Reports of two meetings held in London on babyfoods were received. It was agreed that the basic proposals of the Department of Health—that dried milk and vitamin preparations should be supplied from pharmacies rather than clinics -were desirable and that pharmacies should provide milk powder and vitamin preparations to the public in exchange for tokens. The Executive considered that it would greatly simplify the scheme if manufacturers could be persuaded to rationalise their prices so that a token would be generally exchangeable for any dried milk without cash adjustment. These prices should be, if possible, amended at not less than six monthly intervals. The method of clearance of tokens should ensure immediate payment in view of the small profit margin proposed.

The Executive welcomed a proposal that pharmacists be involved in future discussions on the Scottish Drug Tariff. Mr J. A. Myers suggested that non-Tariff appliances might, in special circumstances, be supplied at the cost of the NHS subject to special permission being obtained

from the Health Board.

The British Medical Association in England had, like that in Scotland, been doubtful of the value of serially numbered NHS prescription forms, but that the Society was to approach the Department of Health and Social Security with a request for a trial scheme. Miss E. A. Meikle reminded the Executive that forms EC10 RBP for hospital outpatients were serially numbered and that records were kept of their issue to doctors.

It was noted that a letter had been sent from the British Medical Association to secretaries of Local Medical Committees asking them to remind doctors of the new provisions for dispensing of "incomplete" prescriptions. There was a lengthy discussion on the problem presented to pharmacists by these regulations and their interpretation by pricing bureaux. It was agreed that these problems appeared insuperable so long as the present regulations remained in force and that the only solution would be an amendment to the regulations themselves. In particular the pharmacist should have professional discretion to supply a strength which he knew to be appropriate or to have previously supplied, when this was not stated on the prescription and the prescriber could not readily be contacted. Where no quantity was stated and the prescriber could not be contacted, seven days' supply should be allowed, subject to the exceptions in the present regulations. [Since the meeting, it has been announced that FPN 114 is to be re-examined by the Department—see last week, p669.]

It was agreed that, when regulations on prescription only medicines were published, the opportunity would be taken for circulation by the Society and the British Medical Association of a "Dear doctor and pharmacist" letter drawing the attention of both professions to the dangers inherent in the widespread and unauthorised telephoning of non-urgent scripts.

Proposed amendments to the National Health Service (Service Committees and Tribunals) (Scotland) Regulations 1974, which had been submitted by the Scottish Home and Health Department, were considered. The proposed extension of the time limit for complaints against chemists was questioned but Mr D. C. Mair pointed out that such an extension could well be to the advantage of the chemist as it could allow time for the situation to be discussed and perhaps resolved without recourse to formal service committee proceedings. It was decided that the resident secretary be given discretion to support any proposals of Pharmaceutical General Council (Scotland) in the matter.

Electronic counting errors?

An increasing proportion of minor errors in dispensing may be due to the use of electronic counters, it was thought. Inspectors had therefore been asked to inquire of pharmacists the method of counting used before the sample was taken under the Scottish Drug Testing Scheme. Samples would be classified as: H, hand counted; T, triangle; F, "frier" (tray type); M, electronic machine; OP, original pack, or transfer from such a pack, to final pack. An analysis is to be conducted to see whether there are any significant differences in errors between different methods of counting.

The Executive received details of enrolments from the Scottish schools of pharmacy; it was noted that as a whole there had been no increase in first year enrolments over the previous year. Dr M. Dawson commented that the 80 first year

enrolments at Strathclyde had been selected from 800 applications and that half of those selected had five A-grade passes in the Scottish Certificate of Education (Higher) examinations.

The resident secretary, Dr J. Chilton, reported that the various working parties on a new course for pharmacy technicians had now reported to the course committee and that it was hoped that regulations and syllabuses would be ready for October 1977, when they would be adopted throughout Scotland. Following representations from the Society it had been recommended that the title of the course be amended from "pharmacy" to "pharmaceutical science".

Mrs Paterson reported that in a survey she had recently conducted, 24 out of 71 preregistration students in Scotland had not yet obtained employment.

Pre-registration grants

The Pharmaceutical Services Negotiating Committee had, it was reported, agreed with the Department of Health and Social Security that a portion of the global sum for remuneration of chemist contractors in England and Wales should be allocated as a grant to those employing preregistration students. Although the proposal has already been raised twice with Pharmaceutical General Council (Scotland), Council has asked Executive to make fresh representations to them.

It was noted that Council, at its meeting in July, decided that the collection and delivery of prescriptions by a pharmacist from a drug store which he owned was unethical unless the scheme had been approved by the health board on the recommendation of the Area Pharmaceutical Committee. A letter had been sent from the secretary of the Ethics Committee to a pharmacist in Scotland asking him to discontinue the practice.

On the instruction of Executive Dr Chilton had also written to the Scottish Home and Health Department requesting the inclusion of regulations similar to those in Section 1(1)(d) of the Pharmacy and Medicines Act 1941 in the projected new regulations under Part III of the Medicines Act 1968. The letter had been acknowledged but there was no progress.

It was noted that a supplementary government statement on devolution issued in August included a paragraph on legislative control on the professions. It stated: "After weighing the views submitted, the Government have decided that legislative power should be devolved in respect of the professions which operate essentially on a Scottish basis—that is, the distinctly Scottish teaching profession and the two branches (advocates and solicitors) of the Scottish legal profession. Legislative power in respect of other professions will remain with Parliament". That was in accordance with the Executive's view.

Dr Chilton reported that he had been in touch with the Scottish Home and Health Department concerning elections to Area Pharmaceutical Committees which were due to be held in the spring of 1977. It was agreed that, subject to re-approval of the previous arrangements, Dr Chilton should act as returning officer and that a temporary member of clerical staff be employed. The cost of the elections would be borne by health boards.

People

Mr P. D. Tindley, deputy chairman of BAT Industries Ltd, will be retiring from the board on November 30 after 40 years' service with the BAT Group. He was appointed a director of BAT in April 1959 and became deputy chairman in April 1970.

Mr Anthony J. Fisher, FICA, has been appointed to the board of Benn Brothers Ltd, publishers of C&D. An accountant by profession he is also a director of two other companies within the Benn Group—Cold Composition Ltd and the Tolley Publishing Co Ltd.

Deaths

Glazebrook: On November 5, after a long illness, Mr Phil Glazebrook, key accounts supervisor, Beecham Foods. Having been with the company for the past 22 years, Mr Glazebrook had many friends in retail pharmacy in South-west London and Surrey. He leaves a widow and two sons.

Wilkinson: Last month, suddenly, Mr Richard Hall Wilkinson, 4 Abbeydale Road South, Millhouses, Sheffield 7. He qualified in 1952 and is survived by a widow and adult family.

News in brief

- The index of retail prices for all items for October was 163.5 (January 1974 = 100), representing an increase of 1.8 per cent on September and of 14.7 per cent over the year.
- The Medical Research Council is shortly to consider its policy on the support of research into migraine, according to Mrs Shirley Williams, Secretary of State for Education and Science.
- The Chemical and Allied Products Industry Training Board's levy on employers in the industry will be 0.75 per cent of the payroll in the year ended April 5, 1976. An employer whose payroll was less than £140,133 will be exempt.
- ☐ The Home Secretary has issued a direction to Dr John Owens, All Saints Hospital, Lodge Road, Birmingham B18 5SD, prohibiting him from having in his possession, prescribing, administering, manufacturing, compounding and supplying, and from authorising the administration and supply, any Controlled Drug within the meaning of the Misuse of Drugs Act 1971.
- meaning of the Misuse of Drugs Act 1971.

 Sales of safety razor sets by UK manufacturers in the second quarter of 1976 amounted to 3.378m (£980,000), and included 7.181m blades. In addition, 425.566m blades (£7.203m) were sold separately. In the same period 745,000 safety razors and 4.014m blades were exported, and 567,000 safety razor and 1.608m blades were imported, according to Business Monitor PQ 392 compiled by the Government Statistical Service and available from HMSO.

Topical reflections

BY XRAYSER

Big business

The sequence of events in Peckham (p669) is highly disturbing if, at the same time, not surprising. Southwark Council has erected a health centre which is to give accommodation to eight doctors, with property adjoining to be used as a pharmacy. Five pharmacists in the area formed a consortium for the purpose of providing the service from that pharmacy, and in accordance with what has been stated to be a legal requirement, tendered for the property concerned. It is now disclosed that the consortium of pharmacists has been outbid by a company from outside the area.

The local Council decided also to provide accommodation for two doctors in the same area and at the same time to offer adjacent premises for use as a pharmacy. In the latter case, a pharmacist practising in the area entered the lists and tendered, in the manner required, for the accommodation. As with the consortium his bid was unsuccessful and the property has gone to a company from outside the area. A spokesman for the Council said that they wished to grant the tenders to local pharmacists, but that they were compelled to advertise the premises and accept the highest tender.

The new pharmacies, the spokesman went on, were included in the two developments because there were many old people in the area who required ready access to dispensing services. One wonders how ready the access may be to medical services which are concentrated at two points housing ten doctors. Once more we witness the ease with which doctors may move house and at the same time appreciate the problems of established pharmacies left behind when the prizes go to the longest purse.

The Council's spokesman said, in answer to a question, that no more such developments were planned in the area and that perhaps other boroughs "might learn from these problems". That almost suggests that he is not too sure of the action which has been taken. If the law left no option, surely other boroughs in their turn, would have to follow the same pattern? The matter seems to me to require investigation. At the moment, it seems that freedom of manoeuvre is in direct relation to the finances available, and the battle is to the strong.

Payment for drugs

Mr Noel Baumber, a member of the Pharmaceutical Society's Council, told a meeting at Ipswich that in his opinion prescription charges should be increased or a surcharge introduced to raise money which would be retained by the pharmacist and not deducted from the global sum as another form of taxation. The prescription charge was widely regarded as payment for the medicine and deceived the patient about the realities of the cost of the drugs and the value of the professional man who had dispensed the prescription, he added.

I think we may take it that Mr Baumber was giving his personal opinion, for the Council of the Society has persistently and consistently made its attitude clear in the matter of prescription charges, of which it disapproves. After the years of prescription charges and the intimation of 20p per item, both by notice and verbally on receipt of the prescription, it is difficult to believe that the customer thinks he is paying the full cost of the drugs, but even if he did, I cannot see how the value of the professional man who has dispensed the prescription can be assessed by the amount of money asked at the counter.

The speaker also said that "a system of charges would provide a useful filter of minor ailments which would make for better use of pharmacists, relieve the pressure most doctors complain of and save public funds so that cost does not stand in the way of necessary treatment." But is not the very course he proposes doing just that?

A complete 110 photo system



Hanimex 110-format system: Equipment manufactured in Japan and distributed in Britain by Hanimex (UK) Ltd, Hanimex House, Dorcan, Swindon, Wilts.

The designation "system camera" has previously only be applied to quite expensive equipment in the 35mm single lens reflex area. It is a definite sign of the growing importance of the 110-format that cameras and accessories in this gauge should now become available. There are two basic cameras in the Hanimex system, models XP1 and XP2.

The first of these is the simpler, having a fixed-focus optical-glass lens, sensitive shutter-release (with provision for a cable socket) and a simple flash-cube attachment which clips securely on to the right-hand end of the camera body—incidentally, the shutter is then released from the flash-cube attachment and not the body.

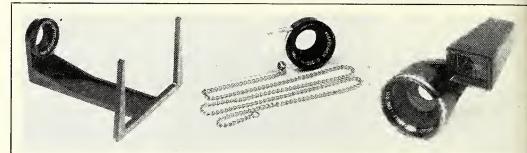
The second has a 26.5mm f/5.6 focusing lens with distance symbols visible in the viewfinder. A similar sensitive shutter release, with cable socket and lock, is again provided. For electronic flash there is a standard "hot-shoe" fitting. The electronically-controlled shutter is coupled to a CdS exposure-meter with a low-light warning indicator built-in.

Accessories

Our tests were carried out with the simpler model of the two, the XP1, and excellent results were obtained indoors and out. But on this occasion the really interesting features were the accessories, the most important being the wide-angle converter-assembly and the telephoto attachment. Both are similar in external design, having a subsidiary lens-mounting which screws into the inside of the frontlens cell of the camera. Forming part of the lens-mount is an integral viewfinder that lies neatly upon the top plate of the camera when the lens is screwed into place. Whichever viewfinder is in use, the

Three views of the same subject with the same camera: (from left) wide angle, standard and telephoto





supplementary one or that in the camera, the image is exceptionally clear.

First, the wide-angle converter: it has a factor of \times 0.7 and is equivalent to using a 35mm wide-angle lens on a 35mm camera. Next, the telephoto attachment: this has a 1.5 magnification and, for comparison purposes, can be considered the equivalent of an 80mm lens on a 35mm camera. The scale of coverage of the wide-angle, standard and telephoto lenses can be seen from the strip of three pictures obtained from the same camera view-point (see foot of page).

Test procedure

The photographs were made (as in all of our tests of 110-format cameras) with Kodak Verichrome Pan, type VP110-12, black and white negative film and standard processing in Paterson Acutol negative developer, thorough intermediate washing, acid-hardener fixing and final washing followed by Paterson anti-static wettingagent and normal air-drying-not heatassisted, which can have deleterious effects on the final granularity. All enlargements are made on normal-grade bromide-paper in a precision enlarger using an f/4 El-Nikkor lens. Although care is taken—as in the original photography, by using a firm support for the camera to eliminate shake-no special processes are used at all. If there was any small criticism at this point it would be that when using the telephoto attachment there was a slight vignetting of the picture area at the extreme top and bottom left-hand corners of the negative.

The next accessory to be considered is

the close-up lense attachment. This, again, screws into the prime lens-mount on the camera and carries with it a subsidiary prism or wedge at its side that provides parallax correction for the camera view-finder. To avoid having to carry a tape-measure for assessment of the correct working-distance of 20in, a light chain of that length is attached to the body of the accessory. That means that it is easy to set up the range and, when about to take the picture, let go of the chain.

Copier attachment

The last item is the copier attachment which also has a close-up lens built into it, screwing into the bezel of the primelens on the camera to form a copy-stand. The working distance is extremely short—only 4in—and the field of view is approximately 3in by $2\frac{1}{4}$ in between the "square-U" shaped base frame. An example of a photograph taken with this accessory is a pair of special-issue postage-stamps; as reproduced above right they are larger than life-size.

There is another point of criticism here, though, and that is that the copier frame is moulded from a relatively-soft plastic material. It is not rigid enough to support the camera, even when using a cable-release, without shake. To be really effective it cither needs extra ribbing or diecasting in metal. (For our tests we used a chemical retort-stand-and-clamp to hold the assembly firm).

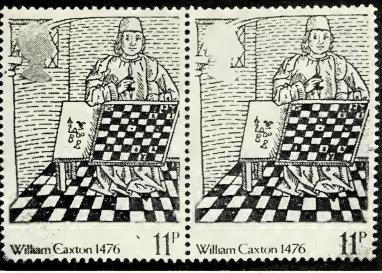
However, the attachment is perfectly adequate for "framing" any subject, when holding the camera in the hand—we did this for some small flower close-up pic-



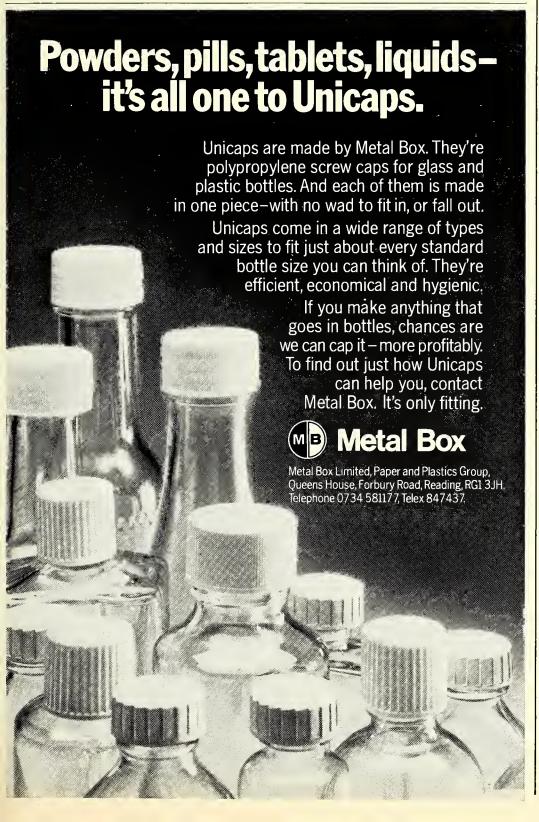
Left: Haminex XP-1 camera (£14.99) in its presentation case together with the copier attachment (£7.31), close-up lens with 50cm chain (£6.37) and wide angle converter (£16.50); the telephoto converter (£6.50) is styled similarly to the

Right: Enlargement of a photograph of postage stamps taken using the copier attachment;

tures with good results. Even with the first reservation, this accessory extends the usefulness of the basic cameras. The presentation of the camera, and of its



accessories separately cartoned, is good, with adequate double-walled packing attractively over-printed in green, white and black for all the separate items.



Films

A Way of Life

Produced by the Health Education Council, 78 New Oxford Street, London WC1A 1AH.

Available on free loan from the Central Film Library, Government Buildings, Bromyard Avenue, London W3 or from the Health Education Council price £120.

16mm, colour, sound, 24 minutes.
The Health Education Council, in association with the Scottish Health Education Unit and the British Nutrition Foundation have produced a film which focuses on the health hazards presented by being overweight with the aim of reeducating viewers into more sensible eating habits. The message is carried in the story of a "typical" young family whose life style is shaken when the father collapses after ignoring repeated warnings about being overweight. His diagnosis and treatment are shown, including his protestation that at fifteen stone plus he "doesn't eat a lot".

dietician whom this central The character, Jack, has visited stresses the virtues of simple changes in habits, rather than dietary routines. The point is made that a number of chronic illnesses are made worse by overweight and the fact that surgery can be more technically difficult in obese patients is illustrated in an "operation" sequence obviously designed to shock. Another "vivid" sequence presents some cases in an obesity clinic while the voice over talks of the dangers of overfeeding children which may result in them learning to walk late, developing knock-knees and flat feet and suffering from bronchitis and other respiratory disorders; and of overweight adults who run the risk of a wide variety of conditions like diabetes, cerebral haemorrhage and heart disease.

However it is a pity that Jack, although subjected to all these explanations and graphic diagrams remains unconvinced and re-gains the weight he lost. The film ends when his baby's pram runs away from him and we hear his laboured heartbeat as he pounds down the road after it. His svelte sister-in-law is seen overtaking him and rescuing baby but his thanks are never seen to be expressed as the film is stopped in mid-pound-presumably indicating that the poor man has suffered a heart attack and really should have listened to the doctors and the dieticians.

Despite the sad story the film would not have succeeded in "motivating" the reviewer to change unwise eating habits. However, since she comes into neither of the groups at which the film is aimed— "teenagers who will see the value of prevention, and the 25-30 year olds whose waistlines may be starting to expand"perhaps it's understandable.

A new trade quarterly for the retailer, distributor and large-scale user of liquefied petroleum gas, LPgas, is to be launched in January by Benn Brothers Ltd, publishers of C&D. Annual subscription is £4.

Trade News

Pavacoi name change

Pavacol-D is the new name for Pavacol Diabetic cough syrup. The manufacturers, WB Pharmaceuticals Ltd, PO box 23, Bracknell, Berks RG12 4YS, state that the formulation remains unchanged and is still suitable for diabetic and non-diabetic patients. The pack sizes (100ml and 500ml) and prices also remain unchanged.

Horizon 10s packs

Akwell division, G. D. Searle & Co Ltd, Lane End Road, High Wycombe, Bucks HP12 4HL, have introduced new packs of 10 Horizon sheaths (Conture £0·81, Tahiti £0·90, Stimula £1·05). Two types of display outer are available. The prepack contains on the bottom row 24 Conture, 24 Tahiti and 24 Stimula packs of three plus 24 Stimula three packs free with, on the top row, five Conture, five Tahiti and five Stimula 10s packs plus five Stimula 10s free. Smaller outers hold 20 packs of 10 of one brand only. The large sizes have been introduced after research has shown that 46pc of sheaths were bought in such packs.

Remington boost

An advertising campaign consisting of 30 second commercials in all television areas except Ulster and Eire is being run by Sperry Remington Ltd, Apex Tower, High Street, New Malden, Surrey KT3 4DL, for Remington shavers. The commercial uses a dissolve technique to show how changing hair styles led to the development of the Radial shaver.

The campaign is being backed by a national Press drive for five of Remington's shavers—the two Radials, the RF3 foil shaver, the Selectro 12 micro slot shaver and the GT3. Half page advertisements will be appearing in the Daily Mail, Daily Mirror, Sun and Daily Record, and space has been taken in the Daily Express, Daily Telegraph and News of the World until December 20. The copy theme is—"Ladies—be generous. Give him a present you can enjoy."

Sperry Remington's Lektro blades are now being marketed as single blades. They are supplied to retail outlets as tear-off blister packs on cards of 20 blades so that the purchasers need buy only what they require at any time to suit their own particular shaver; single, double or triple-head.

Sterling's pick you ups

Christmas is one of the fastest selling periods for Sterling Health Products, Surbiton, Surrey KT6 4PH, and they have produced a range of display material for Milk of Magnesia tablets and liquid and Andrews Liver Salt, which consists of a counter unit, dumpbin and shelf strip. The display material carries the theme of 'After party blues' and depicts the Lewis Carroll's Mad Hatter characters.

Following the tremendous demand from

schools, health authorities and the general public for their poisonous plants poster, Sterling Health Products have produced another poster featuring the poisonous mushrooms to be found in the British countryside. Available free, the poster is in full colour showing five mushrooms including the brightly coloured fly agaric and the innocuous looking but often fatal death cap.

Panty Pads pendant offer

Panty Pads 10's will carry a silver pendant offer until the end of the year. Each packet of 10's from Lilia White Ltd, Alum Rock Road, Birmingham B8 3DZ, contains a leaflet inviting the user to send £2.25 plus the front panel of a Panty Pads pack, to receive a ¾in hall-marked sterling silver initial on an 18in chain, plus a voucher inviting them to save 20p on their next purchase of Panty Pads. If the pendant is not required, the front panels from two packs will enable the consumer to receive a voucher for 20p off.

Duracell cash refund

Following television advertising in the London region throughout the past year Mallory Batteries Ltd, Gatwick Road, Crawley, Sussex, are introducing a promotional offer for Duracell general purpose batteries to ensure a faster retail stock turn of long life Duracell alkaline batteries.

The promotion features a consumer mail-in direct to Duracell for a 25p cash refund following initial purchase of selected batteries; details are displayed on a single showcard. Retailers in the London, Southern and ATV regions will be eligible to participate in this scheme; to qualify they will be expected to purchase one or more special deals of assorted Duracell batteries (trade price £30 net excluding VAT).

Wella magazine offer

The December issue of Look Now magazine contains a triple promotional offer from Wella Ltd, Wella Road, Basingstoke, Hants, comprising two types of hair conditioning in sachets and a Happy Hair Care 1977 calendar. Available from November 18, the December issue will be promoted on seven Radio stations, Capital (London), BRMB (Birmingham), Beacon (Wolverhampton), Piccadilly (Manchester), City (Liverpool), Trent (Nottingham) and Luxembourg.

Value for money Kotex

An 8p repeat purchase coupon will be appearing on 10's packs of Kotex looped towels from Kimberly-Clark Ltd, Larkfield, Kent, and a pre-priced pack (£0·27) is announced for 10's packs of Kotex Simplicity, Kimberly-Clark's brand leader in the "press-on" sector of the feminine towel market. Both these promotions are designed to encourage trial of two of the best-selling Kotex brands, and are the latest steps in a continuing programme of advertising and promotional support.

Johnson's detective competition

Johnson & Johnson Ltd, Slough, Berks SL1 4EA, have instigated a trade promotion for Johnson's baby powder called "super sleuth". It offers the opportunity of cntering a competition based on memory of Johnson's baby powder commercials.

Open to all trade purchasers of a minimum four pack parcel of baby powder, the competition offers the chance to win one of 12 portable television sets, each worth £120. Every entrant will also receive a free hard-back mystery novel from a selection of six titles. A further novel will also be awarded if an off-shelf display of baby powder is made.

In addition Johnson's "mystery shoppers" will be visiting outlets and giving away 200 parcels of mystery novels to stores which feature a display of baby powder. The promotion will run until December 31.

Anadin calculation

A Christmas competition for chemists from International Chemical Company Ltd, 11 Chenies Street, London WC1E 7ET, has been announced for Anadin, Bisodol and Dristan. Competitors are asked to calculate how many Anadin 20 tablet packs would be needed to fill a $4\frac{1}{2}$ cu ft sack and to write a seasonal slogan. First prize is a sheepskin coat for a man or a woman, second prize is a crate of whisky and third is a portable electric fan. There are 25 tartan travel rugs as consolation prizes. Entry forms are available from ICC representatives and the competition closes on December 31.

Simbix slimming success

A slimming success story from Simbix concerns a 25 year old girl who lost eight stone in as many months by following a diet produced for her by Simbix, Ashe Laboratories Ltd, South Street, Godalming, Surrey. Her story, appearing in the November issue of *Slim with beauty*, tells how she challenged the company to help her lose weight after she bought a basketful of slimming aids from her local pharmacy and decided she liked Meal-in-a-glass best.

Rexnell's cab-drivers

Rexnell Ltd, 32 Powerscroft Road, Footscray, Sidcup, Kent DA14 5EG have been



Mr B. Linsley (left) being presented with a solid gold Parker Pen from Mr P. Kelly, sales representative for Scholl (UK) Ltd, for winning a hosiery display competition

ppointed selling agents for the Cabprivers range of cough linetuses in the JK. A bonus offer of 13 to the dozen is evailable on these products until the end of November.

Alexandra Overalls catalogue

An autumn catalogue has been issued by Alexandra Overalls Ltd, King Square, Bristol BS2 8CT featuring seventy-five styles ranging from exclusive designs by couturier Hardy Amies to the practical and nexpensive Alexandra workwear range.

Silvikrin television campaign

To support the relaunch of Silvikrin shampoos and hairsprays, Beecham Proprietaries, Beecham House, Great West Road, Brentford, Middlesex TW8 9BD, have begun a £\frac{1}{4} million television campaign in all regions, except Eire. Comprising four commercials, "flower picking" and "draughts" for shampoos and "table tennis" and "swing" for hairspray, (majoring on the retention of natural movement), the campaign will be concentrated into five months, with an initial five-week burst.

Bonus money scheme ends

The participating manufacturers of the Bonus money scheme, which has been running on test in the Yorkshire area for the past 23 months, have announced that for economic reasons it is to end.

Although not legally obliged to do so, the Bonus money manufacturers will redeem consumer claims of fewer than 1,500 points on a proportional basis until December 31.

Denim for Christmas

Christmas gift packs have been produced for the Denim after shave range, Elida Gibbs Ltd, PO Box 1DY, Portman Square, London W1A 1DY, and there will be a new 30-second commercial on all television stations until Christmas which follows the original theme of "Denim—for the man who doesn't have to try too hard", but on this occasion it is Father Christmas who isn't having to try too hard.

Launched nationally during the summer it is said that the Denim range has already won an impressive share of the men's toiletry market.

DISALCID tablets

Manufacturer Riker Laboratories, Morley Street, Loughborough, Leics LE11 1EP

Description White circular biconvex tablet, marked "Riker" one side, "Disalcid" on other, containing salsalate 500mg

Indications Treatment of chronic inflammatory conditions of joints, tendons, muscles and connective tissue

Contraindications Known hypersensitivity to salicylic acid derivatives

Dosage Adults—usually two tablets three times daily, with last dose at bedtime. Not recommended for children under 12

Precautions Although Disalcid is relatively free from the problems of gastric intolerance associated with anti-inflammatory agents, caution should be observed in patients with active peptic ulcer

Side effects Rarely, allergic reactions may occur with salsalate, as with other salicylates

Storage In a cool, dry place. The container should be kept tightly closed

Packs Bottles of 100 tablets (£2.96 trade) Supply restrictions Recommended on prescription only

Issued November 1976

Notes Salsalate is an ester which after absorption is slowly hydrolysed to two molecules of free salicylic acid. Its insolubility in gastric juice renders it unlikely to cause the gastric irritation and haemorrhage associated with acetylsalicylic acid

NORVAL tablets

Manufacturer Bencard, Great West Road, Brentford, Middlesex TW8 9BD

Description Orange, film-coated tablets engraved "Norval" on one side and "10" on the other, containing mianserin hydrochloride 10mg

Indications Depression, endogenous and reactive, involutional melancholia. Where agitation or insomina is a feature minor tranquillisers may be combined; (barbiturates are not recommended for this use)

Dosage Adults—daily total 20-120mg according to response. Most will respond to 30-60mg daily (one or two tablets three times daily). Not recommended for children

Precautions In combination with other preparations the following should be considered: Normal precautions in diabetes, hepatic, renal or cardiac insufficiency. As with most psychotropic agents avoid alcohol and activities demanding constant attention. Pregnancy— no adverse effects discovered but use not recommended. Absence of specific information precludes use with antihypertensive compounds (eg bethanidine, debrisoquine, guanethidine), similarly should not be administered concurrently with MAOI or within two weeks of ceasing treatment

Side effects Slight sedation during early stages

Packs 90 tablets (£4.54 trade)

Supply restrictions Recommended on prescription only

Issued November 1976

on TV next week

Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east; A—Anglia; U—Ulster; We—Westward; B—Border; G—Grampian E—Eireann; CI—Channel Island

Amber: All except E Anadin: All except E Askit powders: Sc, G Aspro Clear: All areas Atrixo: All except E Aquafresh: So

Beecham Powders: All except WW, So,

We, E, CI

Beecham Powders + Hot Lemon: All

except WW, So, We, E, CI Bic razors: All except E Braun: All except E

Cachet: All except Ln, So, U, E, Cl

Censored: All except E
Chique: All except E
Complan: All except M, Lc
Crystals: U

Denim: All areas
Denclen: So
Disprin: All except E, U

Divi-Dent: All except So, E Gerber baby foods: Ln, Lc, Y, NE

Hai Karate: All except E Herbal Sensation: WW

Imperial Leather foam: All except E Kodak camera outfits: All except E

Laughter: All except E Lucozade: All except E

Mac lozenges: M, Lc, Y, So, NE Macleans: All except E, CI

Milgard: M

Miranda foam bath: Y Oil of Ulay: All areas Old Spice: All areas Philishave: All areas

Philips Hometrim: Ln, M, Lc, Y, NE Philips Ladyshave: Ln, M, So, WW Polaroid Colour Swinger: All areas

Ronson: All areas Sequana: Ls Signal: All areas

Stowaway: All except U, E Tabac: All except U, E Us anti-perspirant: All areas Us shampoo: All areas

Yardley colour cosmetics: All except E

Zendiq: All areas

Venos: All except E

Prescription specialities

TAGAMET tablets, syrup, ampoules

Manufacturer Smith Kline & French Laboratories Ltd, Welwyn Garden City, Herts AL7 1EY

Description Pale green, film coated tablets engraved "Tagamet" on obverse and "SKF 200" on reverse, containing 200mg of cimetidine. Clear orange coloured peach flavoured syrup containing 200mg cimetidine as hydrochloride in 5ml. Ampoules containing 200mg cimetidine in 2ml solu-

Indications Histamine H₂ antagonist which inhibits both basal and stimulated gastric secretion of acid and reduces pepsin output. Tagomet is indicated in duodenal and benign gastric ulceration, recurrent and stomal ulceration and where reduction of gastric acid secretion is beneficial. Also recommended in management of Zollinger-Ellison syndrome

Dosage Adults: 200mg three times a day—with meals and 400 mg at bedtime. This may be increased to 400mg four times a day with meals and at bedtime if response is inadequate. Treatment should continue for at least four weeks. Not evaluated for children

Precautions Dosage should be reduced if impaired renal function: 400mg daily in divided doses should be adequate. Cimetidine may be removed by renal dialysis

Side effects Mild and transient diarrhoea, muscular pain, dizziness and rash occasionally occur

Storage Cool place

Packs Tablets: 100 (£14·29 trade), 500 (£70·00). Syrup: 200ml (£6·29). Ampoules 10 × 2ml (£3·57)

Supply restrictions Recommended on prescription only

Issued November 1976

706 Chemist & Druggist

20 November 1976

New products



Anti-smoking Nicofin atomiser

Nicofin is a new anti-smoking treatment presented, "uniquely" in the form of a mouthspray. It contains silver nitrate.

The product is said to act as a deterrent by affecting the smoker's taste unpleasantly each time a cigarette is inhaled. The spray reacts on the residue of nicotine in the mouth causing a taste that will disappear within a few seconds but reappear on the next inhalation of smoke. Within ten days all toxins in the body will have gone, say the makers, and the psychological barrier will also have been removed.

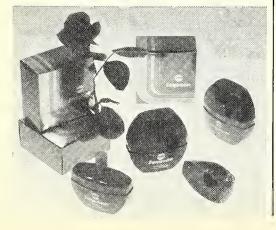
One atomiser (£2·49) contains sufficient for 16 days, and one spray (0·08ml) will last for up to two hours. The atomiser fits conveniently into a handbag or pocket (P.D.S. Ltd, 113 Hammersmith Road).

Sundries

Avant-garde auto manicure

A battery operated auto manicure has been developed by Avant-garde international fashion accessories, 96 St Andrews Road, Walthamstow, London E17 6EG, in association with Cardinelli. It includes various tools for nail trimming, filing, polishing and cuticle removing as well as a built in fan for nail varnish drying, and will be introduced for the first time at the Mount Royal Gift Show.

The cartons for the new Sequana range of bath toiletries from Unicliffe (*C&D*, October 9) are formed from board laminated with Melinex polyester film, and the bottles are blow moulded from a PVC based on Corvic; both are ICI materials



Sponsorship works for LR

Motor racing sponsorship has made a significant contribution towards the objective of "normalising" the brand name Durex, LR Industries believe. "When you go to a race meeting now", says marketing manager Ted Wallbutton, "and you see young people wearing Durex tec-shirts, and putting Durex stickers in their cars and talking about the Durex-Surtees—all without the slightest trace of embarrasssment, then you know it's starting to work."

Ted Wallbutton was assessing the results of a second year in motor racing—in which Durex driver Alan Jones finished the season with fourth place in the Japanese Grand Prix, only seconds behind James Hunt, having been placed several times in earlier events. "Durex-Surtees performed extraordinarily well for a new team with a brand new car—it was all that we expected and hoped for."

LR Industries went into sponsorship because of the "embarrassment factor" still associated with their product—despite the increasing willingness to discuss contraception in the open. "As the first really effective contraceptive method developed, the protective achieved pre-eminence at a time when sex and contraception were still taboo subjects. The later development of other contraceptive methods has coincided with a more enlightened attitude which, regrettably, has not been fully extended to the protective and to Durex. Thus our first objective, quite simply, was to develop a more 'normal' image."

The company has run a substantial Press campaign to overcome the problem, but television remained "closed" and motor-racing sponsorship was seen as providing alternative advantages, particularly in merchandising opportunities which could be carried through to point of sale. Like other commercial sponsors, however, they were disappointed by the BBC's decision not to televise grand prix racing (not because of Durex, but because of the "general level of advertising at the point of action")—though they received considerable coverage at the start of the season as a result of the BBC action!

That publicity was a "bonus", but Wallbutton assesses sponsorship's impact more in relation to the fact that the Durex-Surtees car can now receive consumer-Press mention "without the jokes and wise-cracks which characterised the early days of sponsorship". He says: "I agree that the motor racing fan is only a small percentage of the population—but it's a start. Now, he can say 'Durex' without laughing and giggling. Once we have removed this residual embarrassment then people will be able to think about Durex—and talk about it in the same way as they discuss any other method of contraception. It's a

very serious topic—all we want is to be considered equally seriously."

"So far as the chemist is concerned, this objective, if achieved, must make his job easier. Coupled with an increasing tendency to display openly within chemist outlets, a less embarrassed attitude amongst customers must offer additional opportunities to the aware retailer.

"Our first year in motor racing was a test", commented Wallbutton. "We were in Formula 5000 and we learnt a lot. In 1976 we went into it really seriously in Formula 1. We have been very happy with the results. As to next year—well, we are looking at it very carefully."

Shopfitting

Intershop 77 plans

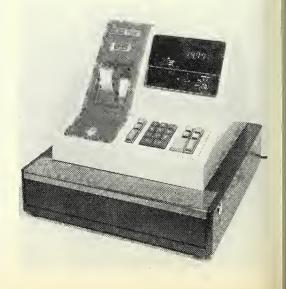
The Shop and Display Equipment Association have announced plans for next year's Intershop exhibition. To be held May 1-4, the exhibition, the 20th in the series, is to retain from this year's display the policy of staging it all on one level at the National Hall, Olympia. Although the Association will still organise the show, the administration will be shared with the journal Shopfitting International.

For writing on glass

A new method of writing directly onto non-porous surfaces, such as glass, metal and plastic, has been developed by Lawtons of Liverpool Ltd, 60 Vauxhall Road, Liverpool L69 3AU. The Stylemark pen (about £2) produces lettering which dries in about 15 minutes. The result, the company claim, is weatherproof and permanent yet can be peeled off when no longer required. A range of pens with different coloured plastic inks are available.

Citizen cash register

A new electronic cash register from Geller Business Equipment Ltd, 15 Percy Street, Tottenham Court Road, London W1, is the Citizen ECR 3000. It is designed to give the maximum information, protection and assistance, it has a large bright green display to show the customer and operator the value of items and totals registered and automatically computes the change due. It issue a small low-cost itemised receipt and retains a true copy within the machine, it add items at speed, can automatically add the tax value if required and provides an end of the day total of cash sales, credit sales and total activity. The machine costs, £359.



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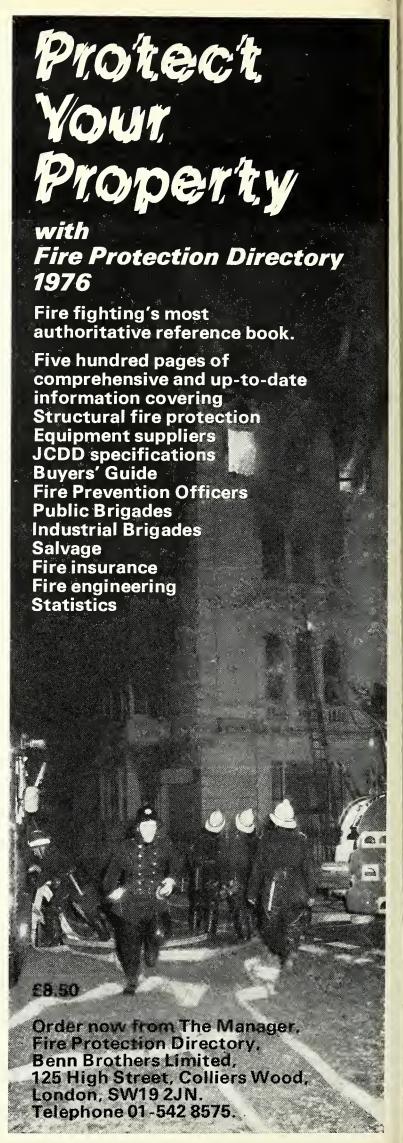
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Problems and policy in NHS hosiery supply

Part 2: Cost-benefit analysis of venous disease therapy

by J. M. Biggs BA, MSc, T. G. Booth PhD, BPharm, FPS, and I. F. Jones PhD, MSc, MPS, AMBIM

This is the second of two articles assessing the use and supply of compression hosiery. Last week (p180), the authors reviewed the products available and the economic trends; below they discuss whether tights should be included in the Drug Tariff.

Treatment of varicose veins, apart from the use of elastic hosiery, is either by surgery (lygation or stripping of affected veins) or compression sclerotherapy (injections)²³. Successful surgery depends compression sclerotherapy on careful pre-operative assessment and marking, on thorough technique and on the surgeon's willingness to follow the patient's progress and give additional therapy where necessary. Regrettably the demands made on the operating theatre in terms of time availability and greater surgical priorities relegates the cold surgery of varicose vein patients to the end of the operating list.

Assessment of the success of surgery in the treatment of varices is hard to achieve and appraise. The attainment of objectivity and acceptability of its fundamental nature is difficult in a study of a treatment which to some is considered both tedious² and a less glamorous branch of surgery. Additionally, such studies require a minimum of five years to complete which is no incentive to current research philosophy.

Medical effects

In studies where sclerotherapy has been compared with surgery, short-term studies have suggested no significant difference in medical effectivity of the two techniques2. The savings to the taxpayer in promoting the use of sclerotherapy in preference to surgery would thus be indicated. However, in studies where observations have been more extended the converse is shown. In one six year follow-up study²⁴, despite a reportedly "most scrupulous injection technique", a cure or improvement of 35 per cent was reported compared with about 80 per cent for the operated cases. A complicating factor is involved for surgery where prior sclerotherapy has been involved and failed.

The surgical procedure is the most costly. A recent estimate for maintaining a patient in hospital for the year 1974-75 has been given as £155 per week25. With improvements in domiciliary health care facilities it is probable that such patients could be treated on an out-patient basis26. Additionally, surgery may be contra-indicated.

Many patients suffer from varicose conditions yet cannot find ready access to hospital facilities through the NHS. Hosiery available through the NHS general practitioner service has certain drawbacks compounded by the fact that the range is restricted to those listed in the Drug Tariff, unless the patient is referred to a hospital department. Tariff elastic hosiery has advantages and disadvantages in the treatment of varices as is the case of surgery and sclerotherapy. It can be argued that the routine use of hosiery in the treatment of venous disorders compares favourably with surgery on a cost basis.

On the other hand, Drug Tariff hosiery has a number of disadvantages. Firstly, the traditional stocking provides compression of only limited areas of the leg. It has no function in the treatment of varices in the upper thigh and groin region. In the pregnant or obese patient, a high proportion of the total cases, where the upper thigh varices are more likely to be en-countered, no effective Tariff hosiery is available. Secondly, the traditional stocking has a tendency to "bunch" at the welt welt causing discomfort and a possible clinical aggravation of venous blood flow. The pregnant and obese patient will encounter difficulty if not physical impossibility of wearing a suspender belt. Finally there is a high patient rejection of existing thigh length Tariff hosiery. Patient acceptability of medicines is a prime consideration in drug therapy and has equal relevance in hosiery and other appliance therapy. Under such circumstances, these patients will either consider a normal retail purchase of support tights, attempt to secure treatment from hospital or accept the clinical condition and thus a deteriorating standard of health which will ultimately result in further expensive treatment. Varicose conditions which remain untreated generally deteriorate.

Evidence needed

The question must be raised as to why tights, whether elastic or support, have not been permitted for supply through the family practitioner services. However, it must be emphasised that it could scarcely be right that the Department should be required to establish a case for the availability of tights on the authority of a general practitioner on form FP10. What must be done is for the manufacturer or the medical practitioners or the consumer to establish a case. All evidence would suggest that the Department would be prepared to consider any proposals substantiated by evidence.

In 1972 a question²⁷ was raised in the House of Commons asking if the Secretary of State for Social Services would allow National Health Service prescriptions for support stockings to be used in partpayment for support tights. In a Commons reply27 it was pointed out that patients should be supplied only with the article which the doctor had prescribed and which the doctor considered clinically suitable. The questioner continued, "Is it not rather unfair that women affected with varicose veins should be condemned to wear gar-ments which will soon be extinct?" The reply: "I am advised that tights and other such garments are liable to slip and are therefore not suitable as a substitute for surgical elastic hosiery when support is needed for the thighs and calves". One might query whether consideration had been given to upper thigh varices.

Tights available from hospitals

Shortly afterwards a request²⁸ was made by the then West Sussex Executive Council to the Department, after consultations with Local Medical and Pharmaceutical Committees, that elastic tights be included in the Drug Tariff. The request was made on the basis that such tights were available free of charge from the hospital service for use by expectant mothers and that there was an "insignificant difference" between cost of elastic stockings and tights. A reply29 from the Department refuted the term "insignificant" and stated that the majority of patients found adequate support from the hosiery available (ie stockings). Tights were available if a patient was referred by the doctor to the hospital and the consultant made the recommendation. The reply also stated that the question of "surgical waist length made to measure hosiery" for supply on prescription was under examination by the

In 1975 Chemist and Druggist30 reported a campaign by a general medical practitioner for support tights as well as support stockings, to be available on NHS prescription. The physician felt it illogical for his patients wanting support tights to have to visit consultants 30 miles away at the nearest hospital. The local Member of Parliament took up the issue with officials at the Department of Health who ultimately replied31 that in the opinion of their medical advisers no construction of elastic tights was as satisfactory as stockings in treatment of varicose conditionsa different approach to that of 1972. One might speculate the reason for the shift in attitude in Government statements of 1972 and 1975. Consideration for the supply of tights under certain conditions was and presumably still is under constant review.

The issue is not easy to resolve but is one where continued pressure for a change

Continued on p710

Hosiery policy

Continued from p679

in Departmental policy can be anticipated. A further aggravation to the problem—as hinted in the question raised in the House of Commons in 1972—was that it appeared chemist contractors had supplied tights on NHS prescription when stockings were ordered. 32 33 No data on the extent of such practice is available. There is also no evidence to suggest that the prescribing physicians did or did not condone the supply or that pharmacist or prescriber considered that such actions are unethical, illegal or beyond the scope of NHS regulations. Both the Central NHS (Chemist Contractors) Committee³² (1973) and the Pharmaceutical General Council, Scotland³³ (1975) have drawn the attention of contractors to such procedures and advised discontinuation.

Range unacceptable

lt would appear that the range of surgical and support tights presently available from manufacturers are not acceptable to the DHSS. Firstly, there are doubts that the elastane based support tights give as good compresion as the rubber basis of elastic yarn, given that there is no generally agreed specification as to what constitutes a support garment³⁶.

Secondly, there is the undoubted problem of fitting elastic tights correctly and of difficulties encountered for example by obese and arthritic patients. Thirdly, elastic tights do "sag" as has been mentioned clsewhere and which remains an unresolved problem. Finally, tights show a tendency to fracture at the groin reducing their life. In conclusion it would appear that the Department has been justified in not accepting tights into the Drug Tariff on the basis of the published information presented so far. The DHSS has a public duty to resist new products being included in the Tariff on the sole basis of fashion/ patient preference which might increase NHS costs without any apparent clinical advance.

If manufacturers and the medical or pharmaceutical professions wish to see any new appliances included in the Tariff in the nature of support tights, then it must be on the basis of published research which details the clinical benefits and/or cost/durability advantages. It has yet to be shown that they represent any clear medical benefit, given the wide variety of garments which different manufacturers describe as "support". One might question whether the House of Commons is a suitable forum for such debates.

What is required is a garment which has the advantages of thigh length stockings, which copes with the problems of upper thigh varices, which is easy to fit, gives good compression and lasts an acceptable period of time.

Summary and comment

This paper has drawn attention to some basic facts:

☐ There is an overwhelming (90 per cent) customer preference for tights or pantiehose in the UK total hosiery market (table 1). The reasons are not defined and probably are manifold but are certainly not solely related to clothes fashion trends.

A high proportion of compression hosiery is purchased privately, representing over 90 per cent, with apparently 6 per cent by volume obtained via the NHS (table 2). Clearly reasons for this should

☐ It has been shown that 88 per cent of the private compression hosiery market is for tights (table 2). Yet tights are not prescribable through the NHS general practitioner service. Two questions follow -firstly, is there a sound medical reason for the non-availability and, secondly, is there an economic basis for the position?

☐ The medical justification for nonavailability appears hard to sustain. There is no doubt there are clinical conditions which require support in the upper thigh and groin areas which cannot be treated by hosiery currently available. Some of these cases, for example in pregnancy, are temporary, eorrective therapy, or prophylactic in nature, readily diagnosed and not demanding of expert consultant advice and consequent consumption of expensive time. Tariff thigh length stockings present difficulties in use, for example with obese or with excessively oedematous conditions. The stocking frequently slips and use of a pantie-girdle or suspender can cause clinical problems in their own right (the "pantie-girdle syndrome"34 35). Bulging of the thigh at the suspender welt is a disincentive to continue wearing the stocking and constriction of the thigh can occur. Against these points it can be argued that tights in some cases do slip and that they also present difficulty for obese, arthritic, pregnant and less ambulant patients when being put on, and they are also liable to fracture.

☐ Economically, the cost-benefit analysis is difficult and the basis for quantification tendentious. However, of the available therapies for venous disorders, hosiery must be considered seriously for prime choice. The apparent ineffectiveness of sclerotherapy and the expense and delay of surgery, together with the uncertainty of success and patient non-acceptability, are contrary weighting factors. What does seem to be ignored is the cost analysis of the consequence of treatment non-acceptability. In drug therapy much technical innovation is used to eliminate this factor. In venous disease, little account seems to be made of the ultimate cost to the taxpayer of delayed surgery, whether it be due to non-availability or active patient avoidance, irrespective of the misery for the patient. Equally, the literature pays scant attention to, and no quantification appears of, the financial cost caused by patients who fail to adopt the alternative of hosiery. Delay in treatment, whether it be active dislike of the hosiery or not, must inevitably cause an enhanced serious condition requiring more drastic measures. Any reason why patients refuse hosiery as a treatment should be carefully researched. The DHSS has been justified in resisting elastic tights being included in the Tariff, as the published evidence has often been technically deficient, incorrect and poorly

An issue which must cause some concern to chemist contractors in terms of income and to the DHSS in consideration of the availability of expertise for hosiery supplies, is the decreasing number of prescriptions for elastic hosiery concurrent with an increasing total number of prescriptions (table 3).

☐ A further point is the effective decrease in the gross profit margin for NHS hosiery prescriptions caused by a static professional fee. This is no incentive to improve expert service in this important area of health care. It should stimulate chemist contractors to seek a better fee through the Pharmaceutical Services Negotiating Committee.

An ignorance of the Drug Tariff appliance section has been advanced as an original reason for this paper. It would perhaps be pertinent to suggest that a thorough reconsideration of the presentation of this section of the Tariff should be carried out.

☐ The terminology used by manufacturers is often confusing, showing variance, and may be leading to less confident promotion of health care. Again consideration should be given by all concerned to better education in this field.

Conclusion

There is little doubt that hosiery has an important role to play in the treatment of the lower limb venous disease states. Disadvantages can be attributed to both tights and stockings currently available. What is required is an advance in technology to produce a garment without these disadvantages. Any such important innovations (and there has been one recently)36 should be considered seriously for inclusion in the Drug Tariff on the merit basis of clinical advance and on a cost benefit relationship vis-a-vis other therapy. It will be interesting to see the extent of support for the resolution, submitted from the Cornwall and Isles of Scilly Local Pharmaceutical Committee, to be considered at the Conference of Local Pharmaceutical Committee Representatives on November 21 which states "That surgical tights of equivalent specification to surgical elastic hosiery be included in Part VI B of the Drug Tariff".

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Pharmaceutical Society of Ireland

Optimism for the future

The Pharmaceutical Society of Ireland is quite optimistic about the future of pharmacy in the Republic and the role of the pharmacist to deliver medical and pharmaceutical care in a modern society.

That was stated by Mr F. Walsh, the new president, at his first official engagement—the annual meeting of the Irish Pharmaceutical Students' Association. He went on to say that the Council of the Society has had serious and prolonged discussions with the University of Dublin and the Higher Education Authority with a view to establishing a four-year degree course to begin by October 1977; he hoped these discussions would be successful. He added that the Society is engaged in the provision of supplementary accommodation to provide more room for lecturers and students on the Shrewsbury Road campus; it is hoped that building will begin there early in 1977.

Speaking on "changing vistas for the practice of pharmacy", Mr Walsh predicted that the pharmacist of the future is likely to be involved in activities such as: counselling patients on the proper use of medicines; community care; giving advice on drugs and medicines to the health professions, including information on drug interactions; participation in the ward round in the developing hospital pharmacy area; and ensuring the quality, safety and efficacy of medicines in the pharmaceutical industry.

Mr G. Ledwith, secretary general, Irish Pharmaceutical Union, said that listening to the various reports increased his optimism and hopes for the future of pharmacy. He regarded his purpose at the meeting as being to remind the students of the reasons and existence of the IPU and to tell them something of the Union's work. In reply to a query Mr Ledwith said he would like to see students taking secondary degrees or diplomas in subjects like commerce, business administration and marketing, to equip them better for posts in industrial pharmacy.

Miss Hennegan, IPSA president, spoke on how the association had adhered to its aims which include forming a permanent contact and social intercourse between students, furthering interests in pharmacy and enhancing the status of pharmacy students and maintaining a close relationship with the Society.

Concern on fenfluramine

The National Executive Committee of the Irish Pharmaceutical Union has expressed concern at reports of abuse of fenfluramine. The Committee holds that availability of the preparation, which is not

PSI Council's view on sale of contraceptives

Certain statements made during the recent Irish Pharmaceutical Congress in Killarney, concerning the attitude of pharmacists when dispensing prescriptions for anovulents, have provoked diverse comments in some Irish national newspapers. The policy of the Pharmaceutical Society of Ireland in this respect has been queried and Mr J. Cahill, registrar, has issued the following as representing the views of the Council:

"When a doctor orders a medicine in the course of treatment, a pharmacist dispensing the prescription has a wellestablished duty to bring to the attention of the prescriber any factors relating either to the drug(s) ordered or to the patient, of which he is aware, which might be adverse to the health of the patient.

"Pharmacists have no legal, professional or ethical responsibility to ascertain the purpose for which a prescription is required."

scheduled in Ireland, should nonetheless be restricted to supply with greater than usual caution and responsibility.

The Union warns pharmacists that the drug, especially when combined with alcohol, can have a powerful sedative effect. In normal dosage, however, it does not cause central nervous stimulation or tolerance induction according to the manufacturer's literature. Demand for fenfluramine is coming mainly from teenage girls, who may be experimenting with slimming diets. This age group is most given to swapping tablets and taking excess doses, sometimes combined with alcohol, the union feels, and it stresses that with low food intake, the absorption and effect of any drug is increased.

Industrial strategy progress report

The Government has now accepted the principle that regard should be taken in approprite cases, of industrial strategy requirements in the operation of the Voluntary Price Regulation Scheme for ethical medicines. The extent to which that could be done and the means of achieving that aim are being "urgently examined".

That was stated on Tuesday by Mr Roland Moyle, Minister of State for Health, in a written Parliamentary reply to Mr Michael Grylls, who had requested information on the action taken so far on the report from the NEDC pharmaceuticals sector working party (C&D, July 1, p70). Two other major recommendations concerned import substitution and repeal of Section 41 of the Patents Act. Mr Moyle stated that the Department of Health's first proposals for identifying import substitution possibilities were considered at the working party's last meeting, and that the question of Section 41 was one of the matters currently under discussion with the industry.

Letters

ncomplete prescriptions

Vith reference to the letter from Mr D. C. Austin (October 23). Surely in these days of stringency and economic chaos, it would be better thinking if, regardless of he regulations now in force for "p.c." and 'p.n.c." endorsements, the prescriber be nade to pay.

It is no use asking for more money for work that we, as professional men, need to do if our job is to be done ethically. More money paid out to pharmacists for such work will only mean a bigger debt for the NHS and for the country as a whole.

The problem would soon be solved if, for every "p.c." and "p.n.c." prescription on endorsed, the prescriber forfeited part of his remuneration. A pain in the prescribers' pockets would soon cure the ills of this misbegotten system.

A. J. Angell Kings Heath, Birmingham

Invoice checking

l enclose a copy of a letter which I am posting to the managing director of Ashe Laboratories. It is, I think you will agree, self-explanatory, and it demonstrates the paramount importance of checking all invoices and statements.

R. Hutchinson Harrow Weald Middlesex

I have received a letter from your credit control manager demanding payment of outstanding arrears within seven days "or else". I draw your attention to your letter acknowledging mine, dated 17 September, which read:

"I really haven't got the time to write letters. I 'phoned your office a long time ago and asked that your rep be contacted to straighten up this mess. I have heard nothing further, so I am writing this in my own time.

(i) Amplex Roll-on (4 doz and 6 doz): I bought these to sell at £0·19. They are costing me more than that! I could have bought them from Sangers to sell at £0.19 in any case.

(ii) Maws Baby Lotion etc (8 cases): these were a special once-only offer to sell at £0.29!

(iii) Eugene Majic (4 cases): I could have bought these cheaper from Sangers!

I enclose your statement for £58.84. I am certainly not going to pass it on to the proprietor for his attention. I suggest that you scrap all invoices, statements etc, and start afresh. It would help if your rep could call and see me."

Since this is a chemist's shop and not a charitable institution, I do implore you to adopt a more co-operative and understanding attitude.

A spokesman for Ashe Laboratories said

that a representative had called on Mr Hutchinson. However, Mr Hutchinson told C&D on Tuesday that he had not, by that time, received such a call.

Travel costs for LPCs

Geordies here, Geordies there, Geordies everywhere—as any Newcastle United football fan will tell you; but what noone else will tell you is that Newcastle upon Tyne is 273 miles from London and for the representatives of North Tyneside Local Pharmaceutical Committee it is a little bit more than that. Under present regulations it costs the contractors of North Tyneside at least £50 to send each representative to the contractors' conference in London. We feel that this is a gross injustice for any of the LPCs outside London.

That, basically, is the reason for our

resolution at the conference. We are looking for support from all Local Pharmaceutical Committees' representatives, particularly those who have similar distances to travel as ourselves, to press the Pharmaceutical Services Negotiating Committee to devise a more equitable method of charging expenses for representatives attending this Conference.

J. S. Anderson
Honorary secretary
Newcastle on Tyne

A 'Royal' Society?

Do you not think that we could become a "Royal" Society now that we have new headquarters? There is such a thing as "morale" boosting.

> W. P. Richards Newcastle-under-Lyme

Cosmetics and toiletries market 40 pc up

"The cosmetics and toiletries market is holding up well under current hyperinflationary conditions. Prices at March 31, 1976, were just over 40 per cent above those ruling two years earlier and, whilst there has been some decline in volume demand, it is not, in general, of a serious nature. Once again the cosmetics market is showing its traditional resiliency." That is the finding of the latest market intelligence report compiled by Communications & Marketing Partnership Ltd from Department of Trade and Industry data.

Consumer spending on all items in the first quarter of 1976 was 2 per cent lower than during the corresponding period a year earlier, after allowing for inflation. Since June 1975 spending on 'other goods' (in which cosmetics and toiletries are classified) has been increasing less slowly than overall spending, and the figures for the first quarter of 1976 show that this trend continues as pressure on pay packets forces consumers to confine expenditure more and more to the essentials of life.

In spite of this, sales of cosmetics and toiletries in the UK during the quarter reached £80.5m at msp, and at this level demand was up by 17 per cent compared with the January-March quarter 1975. However, the wholesale price index for the 1976 quarter was also up by 19 per cent suggesting a decline in volume demand of around 2 per cent. Expenditure on cosmetics and toiletrics was somewhat less buoyant than overall spending, but on the whole the sub-category performed rather better than others in this group.

The sector to put on the best increase was that of dental preparations where shipments were up by 37 per cent. It is estimated that this represents a real growth of 17 per cent.

Make-up items also recorded a good above-average increase; with shipments up by almost 25 per cent and prices by 22 per cent there was probably some real growth in demand. This represents a change in the trend as sales in 1975 were well down on the average for all cosmetics and toiletries. The report comments: "Whether this sluggishness in demand was due to consumer resistance to rising prices or whether it was due to both the retail

and wholesale trades improving their liquidity, it remains a fact that sales in the first quarter of 1975 were depressing and demand in 1976 is being compared with a low norm. What the first quarter's figures do suggest however is that the factors which were inhibiting sales have now been overcome and that the decline had bottomed out."

Another sector with an above-average performance was shampoos. Here the overall increase was just over 20 per cent; after allowing for higher prices this growth probably represents an increase in volume demand of about 4 per cent. Apart from fragrances all other sectors but one recorded a below-average growth, but because price increases were at a lower level many put on small real term growth.

The one exception was men's toiletries which showed a decline of 2 per cent in overall terms. The fall occurred in two segments—in pre-shaves, after shaves and Colognes, and in hair preparations. In part this fall was due to the fact that the January-March 1976 figures are being compared with very high shipments in the corresponding period of 1975. At the same time, consumer demand in the run-up to Christmas 1975 was much lower than in the previous year, resulting in a lower level of post-Christmas purchasing in the first quarter of 1976.

Communications and Marketing Partnership Ltd, 352 Strand, London WC2.

Back pain self-help

The Back Pain Association is to sponsor a self-help group to enable back pain sufferers to discuss experiences and remedies.

The idea of the group arose from a newspaper correspondence which revealed the dissatisfaction among sufferers, many of whom felt that doctors do not understand the seriousness of their pains. In the latest issue of the Association's newsletter the deputy director, Mrs Helene Grahame, says "One of the factors which came through most strongly was that back pain sufferers feel despairing, isolated and out of touch with what is going on". A London meeting to launch the self-help group has already been held.

Company News

Boots retail sales in UK show 5pc real growth

Boots Co Ltd report that in the six months to September 30, retail sales in the UK increased by 18.5 per cent while the average price level rose about 12.5 per cent, indicating a real growth of over 5 per cent. Worldwide non-retail sales increased by 36 per cent and, while this was inflated by the fall in the value of sterling, there was substantial real growth.

Sales of the whole group at £350·4m were 20·8 per cent above the same period of 1975 and the pre-tax profit at £37·7m was up 22·6 per cent. In calculating the profit an additional contribution to the Boots pension fund of £4·4m was charged, the same as in the six months to September 30, 1975.

Because of current economic uncertainty, the directors find it difficult to suggest what the outcome of the year as a whole might be but, in the absence of further government measures substantially to reduce consumer spending, they hope the

progress which has been made in the first half of the year will continue into the second half.

Willows Francis optimistic

In the annual report of Willows Francis Ltd issued last week the chairman, Mr A. J. Cornforth, reports that the new financial year has started well and that exports continue to show a substantial increase. While all three of the company's divisions have contributed to the improvement, the biggest gains have been from the dental and medical division. Sales in the veterinary division, long hampered by a low level of activity in the livestock industry, continue to improve. Barring unforeseen circumstances, a future of increasing profits and dividends is anticipated.

Modernisation of the premises at Epsom has been completed and the cost has been mot entirely from cash flow. Plans have been made for further improvements at the Westhoughton factory and again the cost will be mot from internally generated cash. (Company results C&D, October 2, p442.)

Briefly

F. A. Billington (Langley) Ltd are taking over the pharmacy of F. J. Gibson Ltd, 93 Darlington Street, Wolverhampton WV1 4H3, on November 29. The business will be trading as F. A. Billington (Chemists) Ltd.

Polaroid seek to appeal on Kodak decision

Polaroid Corporation and Polaroid (UK) Ltd are to seek the House of Lords' permission to appeal to it for reinstatement of a temporary injunction against Eastman Kodak.

The injunction, which was lifted by three judges in the Appeal Court last week, had prohibited Eastman Kodak Co and Kodak Ltd from manufacturing or selling its instant cameras and instant print film in the UK pending trial of a patent action being brought against Kodak by Polaroid. In its decision the Appeal Court refused Polaroid permission to appeal to the House of Lords to reverse the decision.

Giving the judgment, Lord Justice Buckley said in his view there was no serious risk of Kodak driving Polaroid out of the UK or causing irreparable disruption of their business. If the injunction were enforced, Kodak might suffer damage which it would be difficult, if not impossible, to quantify, and trial of the main action might not take place for two years or possibly longer.

Although Kodak had not yet started production in the UK they had already made very substantial investment in capital expenditure. The marketing ban would mean that the investment would be stultified or made sterile until the trial.

Kodak began making and marketing their cameras and films in North America last April and were now poised to start production in Europe. They contemplated production at their Stevenage factory and were committed to £400,000 expenditure for an assembly, line. The new cameras

and films might prove vital to the survival of the Stevenage factory; it was running at a loss and closure could result in transfer of production to Germany. Lord Justice Buckley added there was no doubt about the ability of either party to pay damages which might occur before the main trial and in his view it was not a case in which to grant a temporary injunction before that trial.

Lord Justice Goff agreed and said if Kodak were stopped from production they might suffer loss which could not properly be compensated for in cost terms. Lord Justice Bridge also agreed in allowing the appeal.

Applying for leave to appeal to the Lords, Mr Geoffrey Everington, QC, for Polaroid, said that very large sums of money were involved and the parties had no difficulty in meeting costs of further proceedings. Kodak seemed to envisage a period of eight to ten years to get to trial. If Polaroid did not get an injunction before then patents would have expired by the time the case ended.

Mr Stephen Gratwick, QC, for Kodak, said that time was a very relevant factor. It was important for Kodak's factory operations to have a decision before Christmas.

☐ Currently Kodak instant products are available in the USA, Canada and Puerto Rico. The company has previously announced that these products will be marketed in Europe and in other parts of the world sometime in 1977.

Appointments |

Mr Ray Oakley of Leonard Smith & Co, was recently appointed as the new chairman of the Association of Manufacturers of Medical Preparations, in succession to Mr Leighton Thomas of Hubert A. C. Thomas & Co, and Mr D. Fielding of Parkinsons Ltd, was re-appointed secretary. The association is to arrange its next meeting for early January when it is hoped that an officer of the Department of Health might attend as guest speaker. New members would be welcomed and companies interested should contact Mr Fielding, c/o Parkinsons Ltd, Curzon Street, Burnley, Lancs.

Monopolies and Mergers Commission: Hon John Eccles has been appointed as a part-time member.

Unicliffe Ltd: Mr B. H. Taylor has been appointed sales director and succeeds Mr D. Willis who retired in May after 20 years with the company. Mr Taylor was previously senior sales planning manager with Elida Gibbs.

Firmenich & Co: Mr Tony Leigh has been appointed account executive in the flavour sales division. He was previously technical service manager with Alginate Industries Ltd and covered various sections of the food, pharmaceutical and other industries, both in the UK and overseas.

Warner Lambert: At Eastleigh, Mr O. J. Kielbinski has been promoted to the post of general sales manager, and will be responsible for sales of the pharmaceutical products of William R. Warner & Co Ltd and Warner Lambert Ireland Ltd. He has been with the Eastleigh organisation since 1966, moved into the pharmaceutical sales area in 1975 and was field sales manager before his recent promotion.

Jeyes Group Ltd: Mr Anthony K. Slipper, formerly chairman and managing director of Cadbury Nigeria Ltd and chairman of Cadbury Ghana Ltd, has been appointed executive chairman of Jeyes Group Ltd, the health and chemical products group of Cadbury Schweppes. He succeeds Mr Leo Ellery who has been appointed buying director of Cadbury Schweppes.

Unichem: Seven new regional committee members have been appointed, as follows: for the north Michael Bligh (Leeds), Trevor Whaley (Doncaster) and John Robinson (Sheffield), and for the south Mrs Heather McParland (Langley, Berks), David Carruthers (Forest Gate, London), Michael Procter (Eastbourne) and Keshavlal Jethwa (Kingston-upon-Thames).

Dr Duncan Davies has been appointed chief scientist, department of industry, in succession to Sir Icuan Maddock who will give up the appointment on March 31, 1977. Dr Davies is currently general manager, research and development, with ICI. He will have general responsibility for advising on scientific and technological aspects of the department's strategy and will have administrative responsibility for the department's industrial research establishments, including the Laboratory of the Government Chemist.

*l*estminster

Pill' report 'dangers'

During a discussion in the Lords on the mplementation of the recommendations by the Joint Working Group on Oral Contraceptives that pharmacists and other groups may prescribe the "pill", Baroness Summerskill said "If these proposals are accepted, thousands of people without any knowledge of the side effects of these potent drugs will be permitted to give nnocent and ignorant young girls advice". Baroness Elles, during the same discusssion, urged the Government to take into account "the vast expense involved in training these medical workers, social workers and chemists in order to be suitable people to sell the "pill" over the counter or to give them to young girls.'

Drugs share of NHS to rise?

The provisional cost of drugs prescribed by family doctors in England this year is £362m, some 8·1 per cent of the total cost of the NHS, and is estimated to be £415m in 1977, or 9 per cent of total NHS costs. These figures were given in a Commons reply by Mr Roland Moyle, Minister of

State for Health, who stated that they included fees paid to pharmacists and dispensing doctors, but excluded charges to recipients. In previous years the corresponding figures had been: 1970, £145m, 10·1 per cent; 1971, £160m, 9·4 per cent; 1972, £177m, 9·3 per cent; 1973, £201m, 9·2 per cent; 1974, £223m, 9 per cent; and 1975 £273m, 8·4 per cent.

☐ In 1975, about 26m people in Great Britain were entitled to exemptions from prescription charges, because of their age or exemption certificates, Mr Eric Deakins, Under Secretary, stated in reply to Mr Neil Kinnock.

Statistics on poisoning by analgesics

The estimated numbers of persons admited as in-patients to (non-psychiatric) hospitals in England and Wales suffering from the adverse and suspected adverse effects of analgesics and antipyretics in 1973 were as follows:

Age-band	Number	Age-band	Number
0-4	6,480	35-44	1,700
5-9	340	45-54	1,000
10-14	560	55-64	460
15-24	7,230	65-74	520
25-34	3,770	75 and or	ver 250

That information was given by Mr Roland Moyle, Minister of State for Health, in a written reply in the Commons last week to Mr J. Marshall. Mr Marshall had asked the age distribution 0 to 5 years, 5 to 10 years, 10 to 15 years, etc, of such cases of poisoning for the last year for which figures are available.

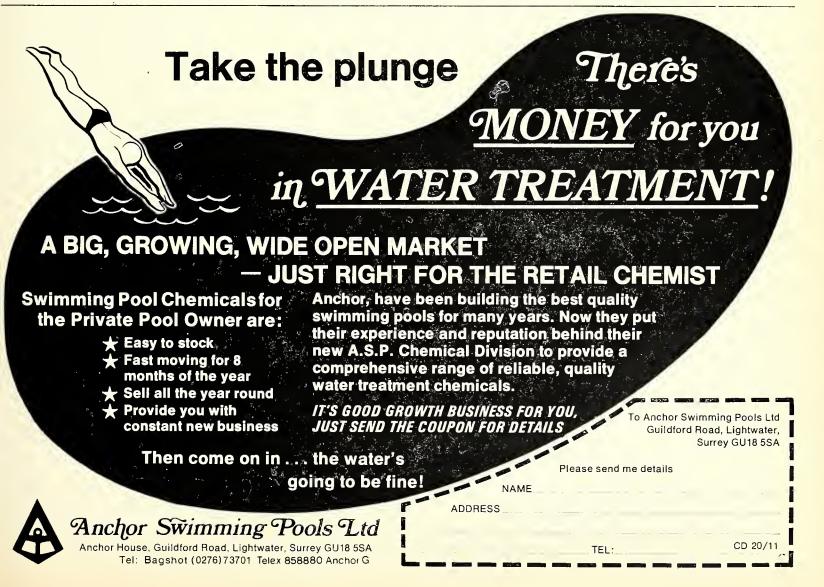
Mr Freud's Sunday Trading Bill fails

An attempt by Mr Clement Freud to secure leave to introduce a private member's bill to reform Sunday trading law (C&D, November 6, p653) failed by 197 votes to 93. The Bill would have amended the Shops Acts of 1950 and 1965, specifically in respect of Schedule 7. In giving examples of just "how bad" the present law is, Mr Freud stated "One may buy prophylactics only if they are on prescription. One cannot go to a chemist and buy one without a prescription." Mr Thomas Torney, a member of the Union of Shop Distributive and Allied Workers, opposed the Bill's introduction.

'No nationalisation plans'

"The Government have no plans to take any pharmaceutical company into public ownership." That answer was given by Mr David Ennals, Secretary of State for Social Services, in reply to a Commons question from Mr Laurie Pavitt, who asked him if he would take into public ownership one of two companies, whose names he had given him; both were manufacturers of medicines whose main customer was the NHS.

☐ Since the introduction of VAT, 25 people have been sentenced to terms of imprisonment from six months to four years in connection with VAT offences, Mr Robert Sheldon, Financial Secretary, said in a House of Commons written answer recently.



Opiate prices firm

London, November 17: Opiate prices are firm, reflecting the continuing inability of the manufacturers to meet world-wide demand. One outcome of the current supply position is a considerable disparity in price levels of the same article between the manufacturers. Pethidine was dearer by £6.00 kg from November 15 and chloroform packed in bottles (as opposed to drums) is expected to be raised in the near future.

In crude drugs most of the American and Chinese products have again been marked up to compensate for earlier weakness of sterling. Among aromatic seeds there was an unexpected demand for cumin and quotations finished the week higher by £50 to £100 ton according to origin.

Arvensis peppermint oil prices continue to rise. Far eastern essential oils are generally a firm market.

Pharmaceutical chemicals

Acetomenaphthone: 100-kg lots, £0.64½ kg.
Adrenaline: (per g) 1-kg lots base £0.25; acid tartrate £0.20. tartrate £0.20.

Aluminium chloride: Pure, 50-kg lots £0.8578 kg.

Ascorbic acid: (Per kg) £9.07; 5-kg £7.97; 25-kg
£6.32; sodium ascorbate, plus 6p; silicone-coated, (per kg) £9.25; £8.15; £6.50 respectively.

Bromldes: Crystals £ per metric ton

Under 50 kg

50 kg 1,000 kg

Calcium 3.07 2.94 Iron 5.72 5.58 Magnesium 4.87 4.48 Manganese 6.12 5.72 Potassium 4.20 4.06	Ammonium Potassium* Sodium	*	1,090 1,010 990	932 853 839	874 816 802
Calcium 3.07 2.94 Iron 5.72 5.58 Magnesium 4.87 4.48 Manganese 6.12 5.72 Potassium 4.20 4.06			k9		
	Iron Magnesium Manganese Potassium		3.07 5.72 4.87 6.12 4.20		50-kg 2.94 5.58 4.48 5.72 4.06 3.14

lodine: Resublimed in 250-kg lots £4.90 kg.

iodides. L per	Ng.		
	Under 50-kg	50-kg	250-kg
Potassium*	3.61	3.48	3.46
Sodium	4.71	4.59	_

Potassium*
Sodium

3.61
3.48
3.46
Sodium

4.71
4.59

* For crystals and granules.

Brucine sulphate: £45.00 kg.
Caffeine: Anhydrous £3.30 kg in 100-kg lots; citrate £2.40 kg (50-kg lots).
Calciterol: (Per kg) £46.20; 5-kg £45.10.
Calcium carbonate: BP light £125 metric ton.
Calcium lactate: 250-kg lots £412 metric ton.
Calcium pantothenate: £6.50 in 25-kg lots.
Carotene: Suspension 20 per cent £39.71 kg; 5-kg £38.61 kg.
Choline: (500-kg lots) bitartrate £1.99 kg, dihydrogen citrate £1.50.
Cinchocaine: Base (5-kg lots) £55.75 kg; hydrochloride £59.30.
Clioquinol: USP XVII 500-kg lots, £11.06 kg.
Cyanocobalamin: £3.00 per g.
Dexpanthenol: (Per kg) £148.50; 5-kg £147.40.
Ferrous gluconate: £1.25 kg for 50-kg lots.
Ferrous gluconate: £1.395 metric ton delivered.
Iron and ammonium citrate: Granular £903; scales £990 metric ton.
Kaolin: BP natural £109.90 per 1,000 kg; light £114.90 ex-works in minimum 10-ton lots.
Metol: Photo grade per kg, 50-kg lots £5.64; 250-kg £5.46.
Nicotinic acid: £3.63 kg (50-kg lots).
Nicotinic acid: £3.63 kg (50-kg lots). 250-kg £5.46.
Nicotinlc acid: £3.63 kg (50-kg lots).
Nlcotinamide: £5.50 kg; 50-kg lots £3.57 kg.
Opiates: (£ per kg) in 1-kg lots; subject to
Misuse of Drugs Regulations—Codeine alkaloid
£454 to £541 as to maker; hydrochloride £391£488; phosphate £347-£413; sulphate £488. Diamorphine alkaloid £531; hydrochloride £484-£527.
Ethylmorphine hydrochloride £426.40 to £444.
Morphine alkaloid £501-£596; hydrochloride and
sulphate £409-£488.

Paraffins: Liquid BP heavy in 1-ton lots £0.353 litre; BPC light £0.317; technical white oils; WA23, £0.294; WA21, £0.307. Petroleum jelly BP soft white £318-£430 as to grade metric ton delivered; yellow BP £302-£404.

Pethidine hydrochloride: Less than 10-kg lots £34.69 kg. Subject to Misuse of Drugs Regulations

Pholodine: 1-kg £452 to £457 as to maker; 60-kg lots £415. Subject to Misuse of Drugs Regu-

Pyridoxine: (Per kg) £25.85; 5-kg £24.20; 25-kg

£23.65.
Riboflavine: (Per kg) £27.83; 5-kg lots £26.62;
25-kg £25.52. Phosphate £75.35 kg.
Thiamine hydrochloride: Per kg £13.50; 5-kg £12.30; 25-kg £11.60. Mononitrate same prices.
L-Thyroxine: £1.70 per kg.
Tocopherol: £18.42 kg; 5-kg £17.32 kg.
Tocopheryl acetate: DL alpha (per kg) £16.22;
5-kg £15.12. Dry 25 per cent £14.96 and £13.86 respectively; 50 per cent £11.16 and £10.06.
Vitamin A: (Per kg) acetate powder, 325 iu: £10.67; £10.12 in 5-kg lots; 500 iu: £14.35 and £13.25. Palmitate oil 1 miu (Per kg) £14.57;
5-kg £13.47.

Vitamin D2: See calciferol.

Vitamin E: See tocopheryl acetate.

Zinc chloride: Granular 96/98 per cent £390 metric ton, delivered.

Crude drugs

Crude drugs

Aloes: Cape £1.28 kg spot; £1.24, cif. Curacao spot nominal; shipments £1.80, cif.

Balsams: (kg) Canada: £12.00 spot; £11.80, cif for shipment. Copaiba: BPC £1.90 on the spot; £1.80, cif. Peru: Spot £6.55; £6.30, cif. Tolu: £3.65 spot; £3.55, cif.

Buchu: Rounds £2.30 kg spot; £2.20, cif.

Camphor: Natural powder, £4.70 kg, spot. Synthetic £0.80.

Cardamoms: (per lb, cif) Alleppy green no 1 £4.00; prime seeds £4.20.

Cascara: £810 metric ton spot; £750, cif.

Cherry bark: Spot £810 metric ton; £800, cif.

Cinnamon: (cif) Seychelles bark £420 ton. Ceylon quills 4 O's £0.66 lb.

Ginger: (ton, cif) Cochin £1,050. Jamaican (spot) £1,200. Nigerian split £730, peeled nominal.

Henbane: Niger £1,030 metric ton spot; £990, cif. Jalap: Mexican whole tubers basis 15 per cent, £1.90 kg, cif.

Menthol: (kg) Brazilian £11.00 spot; £10.80, cif. Chinese £11.50 in bond; £10.80, cif.

Pepper: (ton) Sarawak black £1,390 spot; £1,280, cif. White £1,550 spot; shipment £1,445, cif.

Pimento: Jamaican £1,500 ton, cif.

Seeds: (metric ton, cif) Anise: China star forward £620. Caraway: Dutch £900. Celery: Indian £530. Coriander: Moroccan £750; Indian £630. Cumin: Egyptian £570; Iranian £590. Dill: Indian £265. Fennel: Indian £470; Egyptian £235. Fenugreek: £145.

Senega: (kg) Canadian £13.70 spot; £13.50, cif. Witchhazel leaves: Spot £3.80 kg; £3.70, cif

Senega: (kg) Canadian £13.70 spot; £13.50, cif. Witchhazel leaves: Spot £3.80 kg; £3.70, cif

Essential and expressed oils

Essential and expressed oils

Almond: Sweet in drum lots £1.20 kg.

Anise: (kg) £18.00 spot and cif.

Bois de rose: (kg) £7.00 spot; £7.50, cif.

Buchu: South African £155 per kg spot. Englishdistilled £250.

Camphor white: £0.90 kg spot and cif.

Caraway: Imported £15.00 kg; English no supplies.

Cardamom: English distilled £145 kg.

Cassia: Chinese February shipment £75.00 kg, cif.

Cedarwood: Chinese £1.25 kg spot and cif.

Celery: English £27.00 kg.

Citronella: Ceylon £1.40 kg spot; £1.37, cif.

Chinese £1.95 kg spot; £2.05, cif.

Clove: Indonesian leaf, £2.30 kg spot; shipment
£2.25, cif. English-distilled bud £35.00 spot.

Coriander: Imported Russian £19.50 kg spot.

Dill: £15.00 in drum-lots.

Fennel: Spanish sweet £9.00 kg spot.

Geranium: Bourbon £36.15 kg, cif.

Lavandin: About £5.00 kg.

Lavender spike: £10.00-£11.00 kg spot.

Lemon: Sicilian best grades about £9.70 kg.

Lemon: Sicilian best grades about £9.70 kg.

Lemongrass: £5.25 kg spot; £4.80, cif.

Lime: West Indian about £8.60 kg spot.

Mandarin: Nominal.

Olive: Spot ex-wharf, Spanish £1,320 per metric

ton in 200-kg drums ex wharf; Mediterranean
origin £1,290; Tunisian not offering. Prices subject
to EEC levy alterations.

Orange: Florida £0.75 kg; West Indian £0.50.

Origanum: About £12.00 kg for Spanish.

Palmarosa: No spot; £7.40 kg, cif, nominal.

Patchouli: £8.50 kg spot and cif.

Pennyroyal: £11.00 kg to arrive.

Pepper: English distilled ex-black £77.50 kg.

Peppermint: (kg) Arvensis—Brazilian £5.70 spot;
£5.40, cif. Chinese £5.50 spot; £5.10, cif. Piperata,

American Far West about £2.00, cif.

Postery £5.75 kg spot.

Sasafras: Chinese £2.25 kg, cif. Brazilian £2.20

kg spot and cif.

The prices given are those obtained by importers
or manufacturers for bulk quantities and do not

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

Coming events 13

Monday, November 22

Enfield Pharmacists' Association, Postgraduate medical centre, Chase Farm Hospital, at 7.45 pm. Dr J. M. R. Griffiths on "Physical Medicine".

Medway Branch, Pharmaceutical Society, Postgraduate medical centre, Medway Hospital, Gillingham, at 7.30 pm. Dr D. Bailey (Welsh School of Pharmacy) on "Alcohol".

Tuesday, November 23
Cardiff and South Glamorgan Branch,

Pharmaceutical Society, UWIST, King Edward VII Avenue, Cardiff, at 7.30 pm Mr E. Coleman on "Diamonds and other precious stones". Chemical Society, Analytical Division, Midlands Region, Lecture theatre, Boots Co Ltd, Pennyfoot Street, Nottingham, at 6.15 pm. Annual meeting and joint meeting with Biological Methods Group. Dr J. Bridges (University of Surrey) on ''Alternatives to radio-immunoassay

Fife Branch, Pharmaceutical Society, Ollerton Hotel, Kirkcaldy, at 7.45 pm. Mr J. B. Black (Administrator, Prescription Pricing Division, Common Services Agency) on "Prescription pricing points".

Wednesday, November 24

Ayrshire Branch, Pharmaceutical Society, Marine Court Hotel, Ayr. Dinner dance. Chelmsford Branch, Pharmaceutical Society, Country Hotel, Chelmsford, at 8 pm. Inaugural dinner and dance.

Thursday, November 25

Bristol Branch, Pharmaceutical Society, Salisbury Hotel, Salisbury Terrace, Weston-Super-Mare, at 7.30 pm. Joint meeting with Somerset Branch. Mr P. Lazarus on "Bristol glass".
Northern Scottish Branch, Pharmaceutlcal Soclety, Postgraduate Centre, Raigmore Hospital, Inverness, at 7.45 pm. Dr J. Chilton on 'The Medicines Act".

Friday, November 26 Croydon Branch, Pharmaceutical Society, Greyhound Hotel, Park Lane, Croydon, at 8 pm. Professor J. M. Cameron (Professor of forensic medicine, London Hospital Medical College) on 'Poisoning—accident, suicide or murder?

Advance information

Agricultural and Veterinary Pharmacy Group, Pharmaceutical Society, 1 Lambeth High Street, London SE1 7JN, December 6 at 2.30 pm. Annual meeting and Dr Thomas Gibson (Central Veterinary Laboratories, Weybridge) on "Current research into anthelmintics". Applications to Mr R. E. Marshall by November 22.

Post Scripts

Challenge from British Tissues

British Tissues Ltd, 101 Whitby Road, Slough, Berks, were challenged at squash recently by Caters Bros. The match took place at London Bridge sports centre with Bill Bainbridge, sales director of British Tissues, acting as MC and umpire. Unfortunately he was unable to help his team who were soundly beaten 12 to 3. The defeat was taken on the chin by British Tissues whose attitude is that it is the game that counts. In fact Mr Bainbridge would be glad to hear from any other multiple who have a "mediocre squash team" they would like to put up against his team.

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From ONE wholesaler!
Write or 'phone for price list:
EPS, 75 HOLLOWAY ROAD,
LONDON N7 8JZ
(01-607 6059/3755)

PRICE TICKET MACHINES. Four secondhand (just overhauled by manufactures) METO 80. Half manufacturers price £24.00 each. Also NCR Multitotal electrical cash register, as new. £450.00. Contact A. R. Apperly, 141 Bridgnorth Road, Wollaston. Stourbridge 72870.

Agents

TWENTY-THREE YEARS established connection in retail chemist trade, requires agency. (Areas East London, Herts, Essex, East Anglia including Lincolnshire). Box No. 2438.

SEX DISCRIMINATION ACT

No job advertisement which indicates or can reasonably be understood as indicating an intention to discriminate on grounds of sex (e.g. by inviting applications only from males or only from females) may be accepted unless:

- 1. the job is for the purpose of a private household, or
- 2. it is in a business employing fewer than six persons, or
- 3. it is otherwise excepted from the requirements of the Sex Discrimination Act.

A statement must be made at the time the advertisement is placed saying which of the exceptions in the Act is considered to apply.

Classified Advertisements

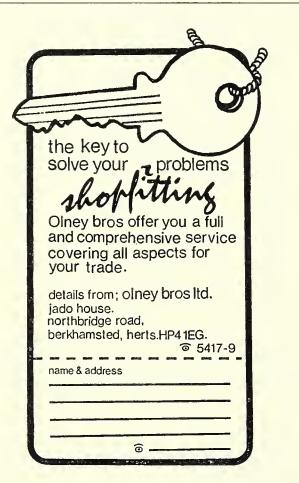
Shopfitting

FYNESTORE. The Chemists' Shopfitter specialists in Dispensaries, Shopfronts, Pharmacy Planning and all allied work. 14 Mimram Road, Hertford. Tel. 54621. NPU recommended.

SELF SELECTION will increase your toiletries sales sufficiently to pay for a complete shop modernisation. As primary manufacturers of wall fittings and counters we offer very early delivery and installation in just one day, or overnight, new shops or old shops or part shops. Immediate quotations without obligation for shopfronts and interiors. Thirsk Shopfitting, 741-743 Garratt Lane, London SW17 OPD. Telephone 01-946 2291 (four lines).

Business opportunities

WE ARE a well established Ethical Pharmaceutical Company in Belgium and Holland with a healthy financial situation and an efficient marketing organisation. With further expansion in mind, we are now interested in adding new products, either finished or in developments to our range. We are also willing to consider any type of agency agreement as we can offer an excellent service from our many years of experience in these markets. Box No: 2437.



Our address for Box No. replies is

Chemist & Druggist 25 New Street Square London, EC4A 3JA Tel: 01-353 3212

Wanted

Pharmaceutical Antiques, urgently required all items connected with old-fashioned Pharmacies — runs of drawers, shop fittings, bottles, jars, pill machines etc. Telephone Ashtead (Surrey 72319/76626, 24 hour answering service, Rooin Wheeler Antiques, 7 Gladstone Road, Ashtead, Surrey.

SYPHONS. Wanted urgently metal top syphons, large or small quantities bought for cash. Please contact R. Wheeler as above.

SOLE DISTRIBUTOR

REQUIRED

Small but rapidly expanding company require sole U.K. Chemist Distributor for their established and well-known range of toiletries and household products. Reply in complete confidence to:

Box No. 2439

WE WILL PURCHASE for cash a complete stock of a redundant line, including finished or partly finished goods, packaging, raw materials, etc. No quantity too large. Our representative will call anywhere. Write or telephone Lawrence Edwards & Co. Ltd., 6/7 Wellington Close, Ledbury Road, London W11. Tel: Park 3137-8.

WANTED URGENTLY Old mahogany chemist shop fittings. We remove and pay cash. John Derham Ltd., 248 Camden High Street, London, N.W.1. Tel: 01-485 6611.

A.&H. OTTER LTD.

(established 1920)

Largest cash stock buyers in the trade for manufacturers' clearing lines, and retailers' stocks.

8 Northburgh Street, London EC1V 0BA. Tel: 01-253 1184/5. Telegrams: "Salvall", London, E.C.1.

Miscellaneous

WINDOW DRESSER chemist, druggist etc., improve your display and increase your sales, able to accept new client. London, North of Thames, and North West area. Tel: 01-958 6808 after 4.30.

FASHION JEWELLERY Jodez (Manchester) Ltd

34 Shudehill, Manchester M4 1EY Tel: 061-832 6564

Largest and most exclusive range of direct and imported Continental Jewellery, Necklets, Pendants, Dress Rings, Ear rings, Brooches, Bracelets, Hair Ornaments.
Suppliers to Chemists over 20 years.

Sample parcels available.

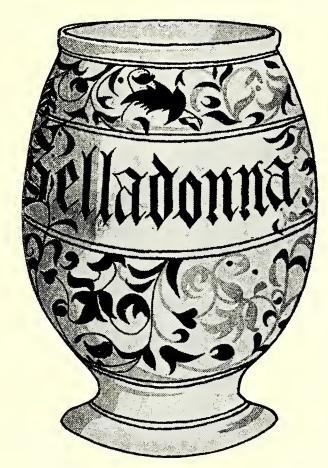


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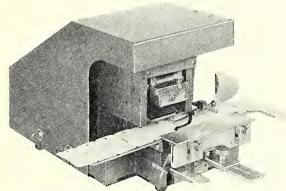
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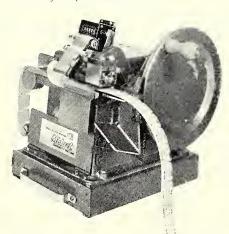
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